

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 9
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
LIBERTARIAN PARTY OF INDIANA

Full Name (Last, First, Middle Initial)
A. HUNKLE, DAVID

Mailing Address
8119 NORTHPOINT DR

City BROWNSBURG State IN Zip Code 46112

Name of Employer DIAGNOSTIC CYTOLOGY Occupation CYTOTECHNOLOGIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400 -

Date of Receipt
6 / 18 / 2009

Amount of Each Receipt this Period
400 -

Full Name (Last, First, Middle Initial)
B. KOLE, MIKE

Mailing Address
7916 TURKEL DR

City FISHERS State IN Zip Code 46038

Name of Employer RM KOLE & ASSOC. Occupation LAND SURVEYOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285 -

Date of Receipt
5 / 13 / 2009

Amount of Each Receipt this Period
285 -

Full Name (Last, First, Middle Initial)
C. ZELLERS, TRAVIS

Mailing Address
8854 ALGECIRAS DR., APT. 2B

City INDIANAPOLIS State IN Zip Code 46250

Name of Employer APPLE Occupation REGIONAL TRAINING MGR.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285 -

Date of Receipt
4 / 30 / 2009

Amount of Each Receipt this Period
285 -

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

970 -

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