

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="129345.80"/>	<input type="text" value="129345.80"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="83724.34"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="147753.19"/>	<input type="text" value="906442.48"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="231477.53"/>	<input type="text" value="1035788.28"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="126961.57"/>	<input type="text" value="931272.32"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="104515.96"/>	<input type="text" value="104515.96"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="903.64"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	31824.10	176139.23
(ii) Unitemized	5707.00	159200.96
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	37531.10	335340.19
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	48089.50	190149.50
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	85620.60	525489.69
12. Transfers From Affiliated/Other Party Committees.....	7500.00	22500.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	60.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	54632.59	358392.79
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	54632.59	358392.79
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	147753.19	906442.48
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	93120.60	548049.69

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	8041.13	64131.39
(ii) Non-Federal Share.....	45677.90	359505.83
(b) Other Federal Operating Expenditures	27.00	27231.77
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	53746.03	450868.99
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	742.31	8797.31
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	80.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	80.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	72473.23	471526.02
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	72473.23	471526.02
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	126961.57	931272.32
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	81283.67	571766.49

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	85620.60	525489.69
34. Total Contribution Refunds (from Line 28(d))	0.00	80.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	85620.60	525409.69
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	8068.13	91363.16
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	60.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	8068.13	91303.16

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 81
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Dwight P. Bieberich
 Full Name (Last, First, Middle Initial)
 Mailing Address 1831 Braemar Drive
 City Fort Wayne State IN Zip Code 46804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Fort Wayne Wire Die Occupation Executive
 Receipt For: 2010
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : SA11AI.30755
 Amount of Each Receipt this Period
 200.00

B. Bruce A. Bodner
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 N Meridian Street
 City Indianapolis State IN Zip Code 46204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Bruce Bodner Co. Occupation Executive
 Receipt For: 2010
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 536.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : SA11AI.30702
 Amount of Each Receipt this Period
 134.10

C. Robert L. Bowen
 Full Name (Last, First, Middle Initial)
 Mailing Address 8239 Clearwater Pointe
 City Indianapolis State IN Zip Code 46240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Bowen Engineering Occupation Executive
 Receipt For: 2010
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 7000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : SA11AI.30731
 Amount of Each Receipt this Period
 7000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 7334.10
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 81
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)
A. William E Cartwright

Mailing Address 1119 Canterbury TRL

City	State	Zip Code
Richmond	IN	47374

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Reid Hospital	Massage Therapist

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2014

Transaction ID : SA11AI.30774

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)
B. Alex S. Choi MD

Mailing Address 230 N Main St

City	State	Zip Code
Zionsville	IN	46077

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Anesthesia Consultants of In	Physician

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2525.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	12	/	2014

Transaction ID : SA11AI.30626

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)
C. Juanita Comer

Mailing Address 2871 W. 900 S.

City	State	Zip Code
Fairmount	IN	46928

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Info Requested	Info Requested

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **340.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2014

Transaction ID : SA11AI.30701

Amount of Each Receipt this Period

230.00

SUBTOTAL of Receipts This Page (optional).....▶	2830.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 81
<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)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Willis Richard Conner
Full Name (Last, First, Middle Initial)

Mailing Address 7260 Shadeland Station

City Indianapolis	State IN	Zip Code 46256
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FEC ID number of contributing federal political committee. **C**

Name of Employer American Structurepoint	Occupation Executive
---	-------------------------

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	05	/	2014

Transaction ID : SA11AI.30565

Amount of Each Receipt this Period
1000.00

B. Harold E. Gilmore
Full Name (Last, First, Middle Initial)

Mailing Address 3665 S. County Road 300 E.

City Liberty	State IN	Zip Code 47353
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FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
460.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2014

Transaction ID : SA11AI.30769

Amount of Each Receipt this Period
175.00

C. Fred S. Klipsch
Full Name (Last, First, Middle Initial)

Mailing Address 3502 Woodview Trace, Suite 200

City Indianapolis	State IN	Zip Code 46268
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FEC ID number of contributing federal political committee. **C**

Name of Employer Klipsch & Associates	Occupation Executive
--	-------------------------

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2014

Transaction ID : SA11AI.30638

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional).....▶	6175.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 81
<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)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Gary J. Lehman
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 4217

City Lafayette State IN Zip Code 47903

FEC ID number of contributing federal political committee. **C**

Name of Employer Fairfield Manufacturing Occupation Executive

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : SA11AI.30596

Amount of Each Receipt this Period
 5000.00

B. Raymond M. Maddox
Full Name (Last, First, Middle Initial)

Mailing Address 5817 N. Cedar Springs Rd.

City Muncie State IN Zip Code 47304

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Dentist

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : SA11AI.30659

Amount of Each Receipt this Period
 125.00

C. Douglas C. Rose
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 90175

City Indianapolis State IN Zip Code 46290

FEC ID number of contributing federal political committee. **C**

Name of Employer Irwin R. Rose & Co. Occupation Executive

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 03 / 2014
Transaction ID : SA11AI.30543

Amount of Each Receipt this Period
 2500.00

SUBTOTAL of Receipts This Page (optional).....▶	7625.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 81
<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)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Cameron Savage
Full Name (Last, First, Middle Initial)

Mailing Address 2233 N. Delaware Street

City Indianapolis State IN Zip Code 46205

FEC ID number of contributing federal political committee. **C**

Name of Employer Limestone Strategies Occupation Consultant

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 03 / 2014

Transaction ID : SA11AI.30541

Amount of Each Receipt this Period
 250.00

B. Gary Schahet
Full Name (Last, First, Middle Initial)

Mailing Address 9333 N. Meridian Suite 203

City Indianapolis State IN Zip Code 46260

FEC ID number of contributing federal political committee. **C**

Name of Employer Schahet Hotels Occupation Executive

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 05 / 2014

Transaction ID : SA11AI.30574

Amount of Each Receipt this Period
 5000.00

C. Steve Schreckengast
Full Name (Last, First, Middle Initial)

Mailing Address 325 S. Earl Ave.

City Lafayette State IN Zip Code 47904

FEC ID number of contributing federal political committee. **C**

Name of Employer Citation Homes Inc. Occupation Executive

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014

Transaction ID : SA11AI.30608

Amount of Each Receipt this Period
 2500.00

SUBTOTAL of Receipts This Page (optional).....▶	7750.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)	PAGE 11 OF 81
<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)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial)
Richard L. Tewksbury

Mailing Address 3268 Shoreway Court

City Indianapolis	State IN	Zip Code 46240
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FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 26 / 2014

Transaction ID : SA11AI.30748

Amount of Each Receipt this Period
110.00

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

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	110.00
TOTAL This Period (last page this line number only).....▶	31824.10

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 81
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial) A. FRIENDS OF SUSAN BROOKS		Date of Receipt MM / DD / YYYY 09 / 12 / 2014 Transaction ID : SA11C.30597
Mailing Address 9425 N MERIDIAN STREET # 237		Amount of Each Receipt this Period 17500.00
City INDIANAPOLIS	State IN Zip Code 46260	
FEC ID number of contributing federal political committee. C C00500207	Name of Employer Occupation	
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 18700.00	

Full Name (Last, First, Middle Initial) B. INDIANA DENTAL PAC		Date of Receipt MM / DD / YYYY 09 / 26 / 2014 Transaction ID : SA11C.30746
Mailing Address 1319 E STOP 10 RD		Amount of Each Receipt this Period 5000.00
City INDIANAPOLIS	State IN Zip Code 46227	
FEC ID number of contributing federal political committee. C C00082636	Name of Employer Occupation	
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. VECTREN CORPORATION EMPLOYEES FEDERAL PAC		Date of Receipt MM / DD / YYYY 09 / 26 / 2014 Transaction ID : SA11C.30762
Mailing Address VECTREN CORPORATION TREASURY DEPT. ONE VECTREN SQUARE		Amount of Each Receipt this Period 2000.00
City EVANSVILLE	State IN Zip Code 47708	
FEC ID number of contributing federal political committee. C C00240069	Name of Employer Occupation	
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional).....▶	24500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 81
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial) A. WALORSKI FOR CONGRESS INC		Date of Receipt M M / D D / Y Y Y Y 09 / 12 / 2014
Mailing Address PO BOX 954		Transaction ID : SA11C.30603
City MISHAWAKA	State IN	Zip Code 46546
FEC ID number of contributing federal political committee.	C C00468579	
Name of Employer	Occupation	
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 23589.50	
		Amount of Each Receipt this Period 23589.50

Full Name (Last, First, Middle Initial) B.		Date of Receipt M M / D D / Y Y Y Y
Mailing Address		
City	State	Zip Code
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
		Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial) C.		Date of Receipt M M / D D / Y Y Y Y
Mailing Address		
City	State	Zip Code
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
		Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	23589.50
TOTAL This Period (last page this line number only).....▶	48089.50

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 81
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)
A. REPUBLICAN NATIONAL COMMITTEE

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00003418

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
18750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 02 / 2014
Transaction ID : SA12.30532

Amount of Each Receipt this Period
 3750.00

Full Name (Last, First, Middle Initial)
B. REPUBLICAN NATIONAL COMMITTEE

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00003418

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
22500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2014
Transaction ID : SA12.30785

Amount of Each Receipt this Period
 3750.00

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	7500.00
TOTAL This Period (last page this line number only).....▶	7500.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. TLS.net

Mailing Address 733 W Henry St.

City Indianapolis State IN Zip Code 46225

Purpose of Disbursement
Email Spam Filter

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9		2	6		2	0	1	4		

Transaction ID : SB21B.30844

Amount of Each Disbursement this Period

2	7	.	0	0
---	---	---	---	---

Category/
Type

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

Amount of Each Disbursement this Period

--	--	--	--	--

Category/
Type

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

Amount of Each Disbursement this Period

--	--	--	--	--

Category/
Type

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

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

2	7	.	0	0
---	---	---	---	---

2	7	.	0	0
---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. AccuPay

Mailing Address 584 N Emerson Ave.

City Greenwood State IN Zip Code 46143

Purpose of Disbursement
FEA: Payroll Processing Fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.30852

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. AccuPay

Mailing Address 584 N Emerson Ave.

City Greenwood State IN Zip Code 46143

Purpose of Disbursement
FEA: Payroll Taxes

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.30853

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. AccuPay

Mailing Address 584 N Emerson Ave.

City Greenwood State IN Zip Code 46143

Purpose of Disbursement
FEA: Payroll Taxes

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.30854

Amount of Each Disbursement this Period

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

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. AccuPay

Mailing Address 584 N Emerson Ave.

City Greenwood State IN Zip Code 46143

Purpose of Disbursement
FEA: Payroll Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2014

Transaction ID : SB30B.30855

Amount of Each Disbursement this Period

68.77

Full Name (Last, First, Middle Initial)

B. Khelley A. Adams

Mailing Address 215 S. Darling St.

City Angola State IN Zip Code 46703

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2014

Transaction ID : SB30B.30821

Amount of Each Disbursement this Period

492.51

Full Name (Last, First, Middle Initial)

C. Airnet

Mailing Address PO Box 11181

City Chattanooga State TN Zip Code 37401

Purpose of Disbursement
FEA: State Party Voter ID Phone Bank Minutes

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 05 / 2014

Transaction ID : SB30B.30840

Amount of Each Disbursement this Period

2408.05

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

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

2969.33

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Anthem Blue Cross Blue Shield of Indiana

Mailing Address 220 Virginia Avenue

City Indianapolis State IN Zip Code 46204

Purpose of Disbursement
FEA: Health Insurance

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 03 / 2014

Transaction ID : SB30B.30834

Amount of Each Disbursement this Period

1321.80

Full Name (Last, First, Middle Initial)

B. Anthem Life Insurance Company

Mailing Address Department L-880

City Columbus State IN Zip Code 43260

Purpose of Disbursement
FEA: Life Insurance

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 03 / 2014

Transaction ID : SB30B.30836

Amount of Each Disbursement this Period

40.00

Full Name (Last, First, Middle Initial)

C. Thomas P. Bagiackas

Mailing Address 22342 Brick Rd.

City South Bend State IN Zip Code 46628

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 14 / 2014

Transaction ID : SB30B.30822

Amount of Each Disbursement this Period

653.58

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

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

2015.38

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Thomas P. Bagiackas

Mailing Address 22342 Brick Rd.

City South Bend State IN Zip Code 46628

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.30816

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Joshua A. Bain

Mailing Address 5910 Jackie Ln.

City Indianapolis State IN Zip Code 46921

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.30818

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Joshua A. Bain

Mailing Address 5910 Jackie Ln.

City Indianapolis State IN Zip Code 46921

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.30817

Amount of Each Disbursement this Period

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

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Thomas Barclay

Mailing Address 2491 N. 400 W.

City Bargersville State IN Zip Code 46106

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.30819

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Thomas Barclay

Mailing Address 2491 N. 400 W.

City Bargersville State IN Zip Code 46106

Purpose of Disbursement
FEA: Volunteer Meals Reimbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.30920

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Thomas Barclay

Mailing Address 2491 N. 400 W.

City Bargersville State IN Zip Code 46106

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.30815

Amount of Each Disbursement this Period

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

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Thomas Barclay

Mailing Address 2491 N. 400 W.

City Bargersville State IN Zip Code 46106

Purpose of Disbursement
FEA: Volunteer Meals Reimbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB30B.30960

Amount of Each Disbursement this Period

Category/
Type

Full Name (Last, First, Middle Initial)

B. Stephanie Beckley

Mailing Address 7424 S 1100 W

City Jamestown State IN Zip Code 46147

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB30B.30825

Amount of Each Disbursement this Period

Category/
Type

Full Name (Last, First, Middle Initial)

C. Stephanie Beckley

Mailing Address 7424 S 1100 W

City Jamestown State IN Zip Code 46147

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB30B.30830

Amount of Each Disbursement this Period

Category/
Type

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

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Stephanie Beckley

Mailing Address 7424 S 1100 W

City State Zip Code
Jamestown IN 46147

Purpose of Disbursement
FEA: Volunteer Meals Reimbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2014

Transaction ID : SB30B.30968

Amount of Each Disbursement this Period

38.10

Full Name (Last, First, Middle Initial)

B. Tim Berry

Mailing Address 7629 Prairie View Dr.

City State Zip Code
Indianapolis IN 46246

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 04 / 2014

Transaction ID : SB30B.30823

Amount of Each Disbursement this Period

3593.52

Full Name (Last, First, Middle Initial)

C. Tim Berry

Mailing Address 7629 Prairie View Dr.

City State Zip Code
Indianapolis IN 46246

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2014

Transaction ID : SB30B.30829

Amount of Each Disbursement this Period

3480.01

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

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

7111.63

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Hunter Bisch

Mailing Address 2015 N. Weinbach Ave. Apt. 2C

City State Zip Code
Evansville IN 47711

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
09 / 04 / 2014

Transaction ID : SB30B.30857

Amount of Each Disbursement this Period

823.93

Full Name (Last, First, Middle Initial)

B. Hunter Bisch

Mailing Address 2015 N. Weinbach Ave. Apt. 2C

City State Zip Code
Evansville IN 47711

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
09 / 18 / 2014

Transaction ID : SB30B.30794

Amount of Each Disbursement this Period

793.95

Full Name (Last, First, Middle Initial)

C. Hunter Bisch

Mailing Address 2015 N. Weinbach Ave. Apt. 2C

City State Zip Code
Evansville IN 47711

Purpose of Disbursement
FEA: Volunteer Meals Reimbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
09 / 18 / 2014

Transaction ID : SB30B.30948

Amount of Each Disbursement this Period

16.00

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

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

1633.88

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Douglas J. Boyle

Mailing Address 5803 Dapple Trace

City Indianapolis State IN Zip Code 46228

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.30831

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Douglas J. Boyle

Mailing Address 5803 Dapple Trace

City Indianapolis State IN Zip Code 46228

Purpose of Disbursement
FEA: Volunteer Meals Reimbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.30935

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Douglas J. Boyle

Mailing Address 5803 Dapple Trace

City Indianapolis State IN Zip Code 46228

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.30793

Amount of Each Disbursement this Period

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

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Douglas J. Boyle

Mailing Address 5803 Dapple Trace

City Indianapolis State IN Zip Code 46228

Purpose of Disbursement
FEA: Volunteer Meals Reimbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.30951

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Burger King

Mailing Address 891 N U.S Highway 31,

City Whiteland State IN Zip Code 46184

Purpose of Disbursement
FEA: Food for Volunteers - Pd by T. Barclay

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.30963

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Chick-Fil-A

Mailing Address 47 W. Maryland Street

City Indianapolis State IN Zip Code 46204

Purpose of Disbursement
FEA: Food for Volunteers - Pd by S. Beckley

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.30970

Amount of Each Disbursement this Period

[MEMO ITEM]

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

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Spencer R. Davis

Mailing Address 8620 S. 175 E.

City Fairmount State IN Zip Code 46928

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB30B.30801

Amount of Each Disbursement this Period

Category/
Type

Full Name (Last, First, Middle Initial)

B. Spencer R. Davis

Mailing Address 8620 S. 175 E.

City Fairmount State IN Zip Code 46928

Purpose of Disbursement
FEA: Volunteer Meals Reimbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB30B.30915

Amount of Each Disbursement this Period

Category/
Type

Full Name (Last, First, Middle Initial)

C. Domino's Pizza

Mailing Address 845 N Capitol Ave

City Indianapolis State IN Zip Code 46204

Purpose of Disbursement
FEA: Food for Volunteers - Pd by S. Sharp

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB30B.30956

Amount of Each Disbursement this Period

Category/
Type

[MEMO ITEM]

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

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Donato's Pizza

Mailing Address 2260 S U.S. 31

City Greenwood State IN Zip Code 46142

Purpose of Disbursement
FEA: Food for Volunteers - Pd by T. Barclay

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2014

Transaction ID : SB30B.30961

Amount of Each Disbursement this Period

28.32

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Dunkin Donuts

Mailing Address 7015 Kentucky Ave.

City Indianapolis State IN Zip Code 46225

Purpose of Disbursement
FEA: Food for Volunteers - Pd by C. Lee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 04 / 2014

Transaction ID : SB30B.30925

Amount of Each Disbursement this Period

23.84

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Dunkin Donuts

Mailing Address 7015 Kentucky Ave.

City Indianapolis State IN Zip Code 46225

Purpose of Disbursement
FEA: Food for Volunteers - Pd by D. Boyle

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2014

Transaction ID : SB30B.30952

Amount of Each Disbursement this Period

23.74

[MEMO ITEM]

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

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Dunkin Donuts

Mailing Address 7015 Kentucky Ave.

City Indianapolis State IN Zip Code 46225

Purpose of Disbursement
FEA: Food for Volunteers - Pd by C. Lee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2014

Transaction ID : SB30B.30966

Amount of Each Disbursement this Period

23.84

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Joe Elsener

Mailing Address 206 W. Southport Rd

City Indianapolis State IN Zip Code 46217

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 04 / 2014

Transaction ID : SB30B.30798

Amount of Each Disbursement this Period

1210.07

Full Name (Last, First, Middle Initial)

C. Joe Elsener

Mailing Address 206 W. Southport Rd

City Indianapolis State IN Zip Code 46217

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2014

Transaction ID : SB30B.30799

Amount of Each Disbursement this Period

1135.08

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

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

2345.15

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Wade Fenwick

Mailing Address 1150 Coppermill Ln. 1E

City Indianapolis State IN Zip Code 46234

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2014

Transaction ID : SB30B.30796

Amount of Each Disbursement this Period

546.09

Full Name (Last, First, Middle Initial)

B. Guardian Insurance

Mailing Address P.O. Box 2459

City Spokane State WA Zip Code 99210

Purpose of Disbursement
FEA: Dental & Vision Insurance

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 03 / 2014

Transaction ID : SB30B.30837

Amount of Each Disbursement this Period

224.80

Full Name (Last, First, Middle Initial)

C. INTEGRAM Expedited Communications

Mailing Address 8421 Hilltop Road

City Fairfax State VA Zip Code 22031

Purpose of Disbursement
FEA: State Party Direct Mail Postage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2014

Transaction ID : SB30B.30846

Amount of Each Disbursement this Period

2410.54

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

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

3181.43

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Rachel Jacobs

Mailing Address 4928 Sunscape Circle, Apt. 1507

City Indianapolis State IN Zip Code 46237

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.30797

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Rachel Jacobs

Mailing Address 4928 Sunscape Circle, Apt. 1507

City Indianapolis State IN Zip Code 46237

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.30800

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Jimmy John's

Mailing Address 1 N Meridian Street

City Indianapolis State IN Zip Code 46204

Purpose of Disbursement
FEA: Food for Volunteers - Pd by V. Lynch

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.30943

Amount of Each Disbursement this Period

[MEMO ITEM]

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

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Christopher Lee

Mailing Address 6190 Oakwood Street

City North Judson State IN Zip Code 46366

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.30828

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Christopher Lee

Mailing Address 6190 Oakwood Street

City North Judson State IN Zip Code 46366

Purpose of Disbursement
FEA: Volunteer Meals Reimbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.30924

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Christopher Lee

Mailing Address 6190 Oakwood Street

City North Judson State IN Zip Code 46366

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.30824

Amount of Each Disbursement this Period

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

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Christopher Lee

Mailing Address 6190 Oakwood Street

City North Judson State IN Zip Code 46366

Purpose of Disbursement
FEA: Volunteer Meals Reimbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.30965

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Little Ceasar's Pizza

Mailing Address 138 W Hively Ave.

City Elkhart State IN Zip Code 46517

Purpose of Disbursement
FEA: Food for Volunteers - Pd by H. Bisch

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.30949

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Little Ceasar's Pizza

Mailing Address 138 W Hively Ave.

City Elkhart State IN Zip Code 46517

Purpose of Disbursement
FEA: Food for Volunteers - Pd by S. Sharp

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.30955

Amount of Each Disbursement this Period

[MEMO ITEM]

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

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Vincent A. Lynch

Mailing Address 626 Stevens St.

City Indianapolis State IN Zip Code 46203

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB30B.30827

Amount of Each Disbursement this Period

Category/
Type

Full Name (Last, First, Middle Initial)

B. Vincent A. Lynch

Mailing Address 626 Stevens St.

City Indianapolis State IN Zip Code 46203

Purpose of Disbursement
FEA: Volunteer Meals Reimbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB30B.30931

Amount of Each Disbursement this Period

Category/
Type

Full Name (Last, First, Middle Initial)

C. Vincent A. Lynch

Mailing Address 626 Stevens St.

City Indianapolis State IN Zip Code 46203

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB30B.30826

Amount of Each Disbursement this Period

Category/
Type

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

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Vincent A. Lynch

Mailing Address 626 Stevens St.

City Indianapolis State IN Zip Code 46203

Purpose of Disbursement
FEA: Volunteer Meals Reimbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2014

Transaction ID : SB30B.30942

Amount of Each Disbursement this Period

83.53

Full Name (Last, First, Middle Initial)

B. Marco's Pizza

Mailing Address 1301 16th St.

City Bedford State IN Zip Code 47421

Purpose of Disbursement
FEA: Food for Volunteers - Pd by T. Barclay

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 04 / 2014

Transaction ID : SB30B.30922

Amount of Each Disbursement this Period

39.94

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Rory K. McShane

Mailing Address 1028 Clubhouse Ct. Apt. 2

City Carmel State IN Zip Code 46032

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 04 / 2014

Transaction ID : SB30B.30787

Amount of Each Disbursement this Period

1545.28

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

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

1628.81

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Rory K. McShane

Mailing Address 1028 Clubhouse Ct. Apt. 2

City Carmel State IN Zip Code 46032

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB30B.30786

Amount of Each Disbursement this Period

Category/
Type

Full Name (Last, First, Middle Initial)

B. Merchants Garage

Mailing Address 31 South Meridian St.

City Indianapolis State IN Zip Code 46204

Purpose of Disbursement
FEA: Parking

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB30B.30835

Amount of Each Disbursement this Period

Category/
Type

Full Name (Last, First, Middle Initial)

C. Dakota Morris

Mailing Address 2127 Covert Ave.

City Evansville State IN Zip Code 47714

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB30B.30791

Amount of Each Disbursement this Period

Category/
Type

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

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Lucie M. Nader

Mailing Address 12025 Colbarn Dr.

City Fishers State IN Zip Code 46038

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB30B.30792

Amount of Each Disbursement this Period

Category/
Type

Full Name (Last, First, Middle Initial)

B. Lucie M. Nader

Mailing Address 12025 Colbarn Dr.

City Fishers State IN Zip Code 46038

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB30B.30789

Amount of Each Disbursement this Period

Category/
Type

Full Name (Last, First, Middle Initial)

C. Norle Investments Inc.

Mailing Address 238 S. Meridian Street

City Indianapolis State IN Zip Code 46225

Purpose of Disbursement
FEA: Parking

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB30B.30851

Amount of Each Disbursement this Period

Category/
Type

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

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Northwestern Mutual

Mailing Address 500 East 96th Street, Ste 125

City Indianapolis State IN Zip Code 46240

Purpose of Disbursement
FEA: IRA Contributions

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 05 / 2014

Transaction ID : SB30B.30841

Amount of Each Disbursement this Period

183.08

Full Name (Last, First, Middle Initial)

B. Northwestern Mutual

Mailing Address 500 East 96th Street, Ste 125

City Indianapolis State IN Zip Code 46240

Purpose of Disbursement
FEA: IRA Contributions

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2014

Transaction ID : SB30B.30849

Amount of Each Disbursement this Period

183.08

Full Name (Last, First, Middle Initial)

C. Papa John's Pizza

Mailing Address 4204 N 1st Ave.

City Evansville State IN Zip Code 47710

Purpose of Disbursement
FEA: Food for Volunteers - Paid by S. Davis

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 04 / 2014

Transaction ID : SB30B.30916

Amount of Each Disbursement this Period

29.50

[MEMO ITEM]

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

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

366.16

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Papa John's Pizza

Mailing Address 4204 N 1st Ave.

City State Zip Code
Evansville IN 47710

Purpose of Disbursement
FEA: Food for Volunteers - Pd by V. Lynch

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 04 / 2014

Transaction ID : SB30B.30932

Amount of Each Disbursement this Period

131.58

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Papa John's Pizza

Mailing Address 4204 N 1st Ave.

City State Zip Code
Evansville IN 47710

Purpose of Disbursement
FEA: Food for Volunteers - Pd by D. Boyle

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 04 / 2014

Transaction ID : SB30B.30937

Amount of Each Disbursement this Period

36.50

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Papa John's Pizza

Mailing Address 4204 N 1st Ave.

City State Zip Code
Evansville IN 47710

Purpose of Disbursement
FEA: Food for Volunteers - Pd by V. Lynch

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2014

Transaction ID : SB30B.30944

Amount of Each Disbursement this Period

30.15

[MEMO ITEM]

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

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Papa John's Pizza

Mailing Address 4204 N 1st Ave.

City State Zip Code
Evansville IN 47710

Purpose of Disbursement
FEA: Food for Volunteers - Pd by D. Boyle

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2014

Transaction ID : SB30B.30953

Amount of Each Disbursement this Period

38.51

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Kelsi Phillips

Mailing Address 60 Alex Dr.

City State Zip Code
Whiteland IN 46184

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2014

Transaction ID : SB30B.30805

Amount of Each Disbursement this Period

548.93

Full Name (Last, First, Middle Initial)

C. PNC Bank Retirement Service

Mailing Address PO Box 3499

City State Zip Code
Pittsburg PA 15230

Purpose of Disbursement
FEA: IRA Contributions

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 05 / 2014

Transaction ID : SB30B.30839

Amount of Each Disbursement this Period

173.08

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

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

722.01

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial) A. PNC Bank Retirement Service		Date of Disbursement MM / DD / YYYY 09 / 19 / 2014
Mailing Address PO Box 3499		Transaction ID : SB30B.30847
City Pittsburg	State PA	
Zip Code 15230	Purpose of Disbursement FEA: IRA Contributions	Amount of Each Disbursement this Period 173.08
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Zachery Potts		Date of Disbursement MM / DD / YYYY 09 / 18 / 2014
Mailing Address 7088 E. Grace Ave.		Transaction ID : SB30B.30803
City New Carlisle	State IN	
Zip Code 46552	Purpose of Disbursement FEA: Payroll	Amount of Each Disbursement this Period 377.18
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Erin Reece		Date of Disbursement MM / DD / YYYY 09 / 04 / 2014
Mailing Address 6240 Valleyview Dr.		Transaction ID : SB30B.30811
City Fishers	State IN	
Zip Code 46038	Purpose of Disbursement FEA: Payroll	Amount of Each Disbursement this Period 1832.81
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	2383.07
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Erin Reece

Mailing Address 6240 Valleyview Dr.

City Fishers State IN Zip Code 46038

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2014

Transaction ID : SB30B.30833

Amount of Each Disbursement this Period

1747.80

Full Name (Last, First, Middle Initial)

B. Robert T. Scott

Mailing Address 312 Johnson St.

City Aurora State IN Zip Code 47001

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2014

Transaction ID : SB30B.30813

Amount of Each Disbursement this Period

597.46

Full Name (Last, First, Middle Initial)

C. Steven S. Sharp

Mailing Address 72 Sheila Ln.

City Valparaiso State IN Zip Code 46385

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 04 / 2014

Transaction ID : SB30B.30814

Amount of Each Disbursement this Period

947.17

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

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

3292.43

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Steven S. Sharp

Mailing Address 72 Sheila Ln.

City Valparaiso State IN Zip Code 46385

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.30810

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Steven S. Sharp

Mailing Address 72 Sheila Ln.

City Valparaiso State IN Zip Code 46385

Purpose of Disbursement
FEA: Volunteer Meals Reimbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.30954

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Tracy R. Smith

Mailing Address 3301 Lincoln Hill Rd.

City Martinsville State IN Zip Code 46151

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.30807

Amount of Each Disbursement this Period

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

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Tracy R. Smith

Mailing Address 3301 Lincoln Hill Rd.

City Martinsville State IN Zip Code 46151

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2014

Transaction ID : SB30B.30806

Amount of Each Disbursement this Period

1988.88

Full Name (Last, First, Middle Initial)

B. Nathaniel L. Storm

Mailing Address 1328 W. Candlewick Ln.

City West Lafayette State IN Zip Code 47906

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 04 / 2014

Transaction ID : SB30B.30809

Amount of Each Disbursement this Period

844.50

Full Name (Last, First, Middle Initial)

C. Nathaniel L. Storm

Mailing Address 1328 W. Candlewick Ln.

City West Lafayette State IN Zip Code 47906

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2014

Transaction ID : SB30B.30808

Amount of Each Disbursement this Period

814.50

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

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

3647.88

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Wells Fargo Advisors

Mailing Address 500 East 96th Street, Suite 100

City Indianapolis State IN Zip Code 46240

Purpose of Disbursement
FEA: IRA Contributions

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	05	/	2014

Transaction ID : SB30B.30842

Amount of Each Disbursement this Period

131.54

Full Name (Last, First, Middle Initial)

B. Wells Fargo Advisors

Mailing Address 500 East 96th Street, Suite 100

City Indianapolis State IN Zip Code 46240

Purpose of Disbursement
FEA: IRA Contributions

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2014

Transaction ID : SB30B.30848

Amount of Each Disbursement this Period

131.54

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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

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

263.08

72384.91

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 45 OF 81
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Marion County Treasurer	Nature of Debt (Purpose): 2013 Property Taxes
Mailing Address 200 E Washington Suite 1001	
City State Zip Code Indianapolis IN 46204	

Outstanding Balance Beginning This Period <input type="text" value="903.64"/>	Transaction ID : SD10.26220	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="903.64"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="903.64"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="903.64"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="903.64"/>

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d))

(To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) INDIANA REPUBLICAN STATE COMMITTEE, INC.	
--	--

Has your committee been designated to make coordinated expenditures by a political party committee? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, name the designating committee:	Full Name of Subordinate Committee
	Mailing Address
	City State ZIP Code

Full Name (Last, First, Middle Initial) of Each Payee Airnet		Purpose of Expenditure Volunteer Voter ID Phone Bank Minutes	<input type="text"/> Category/ Type
Mailing Address PO Box 11181		Date	<input type="text"/>
City State Zip Code Chattanooga TN 37401		<input type="text"/> / <input type="text"/> / <input type="text"/> 09 05 2014	
Name of Federal Candidate Supported JACKIE (SWIHART) WALORSKI	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: IN District: 02	Amount <input type="text"/> 742.31
Aggregate General Election Expenditure for this Candidate ▶ <input type="text"/> 5101.47		Transaction ID : SF.30988	

Full Name (Last, First, Middle Initial) of Each Payee		Purpose of Expenditure	<input type="text"/> Category/ Type
Mailing Address		Date	<input type="text"/>
City State Zip Code		<input type="text"/> / <input type="text"/> / <input type="text"/>	
Name of Federal Candidate Supported	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: _____ District: _____	Amount <input type="text"/>
Aggregate General Election Expenditure for this Candidate ▶ <input type="text"/>			

Full Name (Last, First, Middle Initial) of Each Payee		Purpose of Expenditure	<input type="text"/> Category/ Type
Mailing Address		Date	<input type="text"/>
City State Zip Code		<input type="text"/> / <input type="text"/> / <input type="text"/>	
Name of Federal Candidate Supported	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: _____ District: _____	Amount <input type="text"/>
Aggregate General Election Expenditure for this Candidate ▶ <input type="text"/>			

SUBTOTAL of Expenditures This Page (optional).....▶	<input type="text"/> 742.31
TOTAL This Period (last page this line number only).....▶	<input type="text"/> 742.31

**SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Indiana Republican Party State Fund	MM / DD / YYYY 09 / 03 / 2014	40000.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	40000.00
Transaction ID : H3.30913	
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: H3

Transaction ID : H3.30913

This is a partial payment for the overhead for the dates 8/1/14 - 8/31/14.

Form/Schedule:

Transaction ID:

**SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Indiana Republican Party State Fund	MM / DD / YYYY 09 / 15 / 2014	742.63

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	742.63
Transaction ID : H3.30994	
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: H3

Transaction ID : H3.30994

This entry is for corporate in-kinds we received for a state party staff event that did not raise any money nor have any federal candidate activity associated with it. Therefore I entered the in-kinds as administrative expenses.

Form/Schedule:

Transaction ID:

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 INDIANA REPUBLICAN STATE COMMITTEE, INC.

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Indiana Republican Party State Fund	MM / DD / YYYY 09 / 19 / 2014	13889.96

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	13889.96
Transaction ID : H3.30914	
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	54632.59
TOTAL This Period (Generic Voter Drive)	0.00
TOTAL This Period (Exempt Activities)	0.00
TOTAL This Period (Direct Fundraising)	0.00
TOTAL This Period (Direct Candidate Support)	0.00
TOTAL This Period (Public Communications Referring Only to Party)	0.00
TOTAL This Period (Total Amount Transferred).....	54632.59

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: H3

Transaction ID : H3.30914

This is the remaining payment for the overhead for the dates 8/1/14 - 8/31/14.

Form/Schedule:

Transaction ID:

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.30885 Bodner Opera House, LLC Mailing Address One N. Meridian St.Suite 300		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City State Zip Code Indianapolis IN 46204	Allocated Activity or Event Year-To-Date 396202.95		
Purpose of Disbursement: September Rent	<input type="checkbox"/> Category/ Type	Date <input type="text" value="09"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>	
Activity or Event Identifier: Administrative			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="5445.63"/> + <input type="text" value="30858.55"/> = <input type="text" value="36304.18"/>			

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.30886 Bright House Network Mailing Address P.O. Box 741855		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City State Zip Code Cincinnati OH 45274	Allocated Activity or Event Year-To-Date 396564.09		
Purpose of Disbursement: Cable & Internet Expense	<input type="checkbox"/> Category/ Type	Date <input type="text" value="09"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>	
Activity or Event Identifier: Administrative			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="54.17"/> + <input type="text" value="306.97"/> = <input type="text" value="361.14"/>			

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.30887 Office 360 Mailing Address 7301 Woodland Dr.		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City State Zip Code Indianapolis IN 46278	Allocated Activity or Event Year-To-Date 396777.77		
Purpose of Disbursement: Office Supplies	<input type="checkbox"/> Category/ Type	Date <input type="text" value="09"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>	
Activity or Event Identifier: Administrative			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="32.05"/> + <input type="text" value="181.63"/> = <input type="text" value="213.68"/>			

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="5531.85"/>		<input type="text" value="31347.15"/>		<input type="text" value="36879.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.30864 Spencer R. Davis		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 8620 S. 175 E.		Allocated Activity or Event Year-To-Date 397658.93	
City State Zip Code Fairmount IN 46928	Category/ Type	Date <input type="text" value="09"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Mileage Reimbursement		Allocated Activity or Event Year-To-Date 397658.93	
Activity or Event Identifier: Administrative		Date <input type="text" value="09"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>	
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
1.05		5.95	7.00

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.30866 Nathaniel L. Storm		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1328 W. Candlewick Ln.		Allocated Activity or Event Year-To-Date 397775.93	
City State Zip Code West Lafayette IN 47906	Category/ Type	Date <input type="text" value="09"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Mileage Reimbursement		Allocated Activity or Event Year-To-Date 397775.93	
Activity or Event Identifier: Administrative		Date <input type="text" value="09"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>	
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
17.55		99.45	117.00

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.30872 Thomas Barclay		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2491 N. 400 W.		Allocated Activity or Event Year-To-Date 398087.05	
City State Zip Code Bargersville IN 46106	Category/ Type	Date <input type="text" value="09"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Mileage and Supplies Reimbursement		Allocated Activity or Event Year-To-Date 398087.05	
Activity or Event Identifier: Administrative		Date <input type="text" value="09"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>	
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
46.67		264.45	311.12

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
65.27		369.85		435.12

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
65.27	369.85	435.12

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.30874
Joshua A. Bain
Mailing Address 5910 Jackie Ln.
City Indianapolis State IN Zip Code 46921
Purpose of Disbursement: Mileage Reimbursement
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 398108.65
Date 09 / 04 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
3.24 + 18.36 = 21.60

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.30875
Thomas P. Bagiackas
Mailing Address 22342 Brick Rd.
City South Bend State IN Zip Code 46628
Purpose of Disbursement: Mileage Reimbursement
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 398138.65
Date 09 / 04 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
4.50 + 25.50 = 30.00

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.30876
Christopher Lee
Mailing Address 6190 Oakwood Street
City North Judson State IN Zip Code 46366
Purpose of Disbursement: Mileage Reimbursement
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 398257.75
Date 09 / 04 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
17.86 + 101.24 = 119.10

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.60		145.10		170.70

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.30877 Vincent A. Lynch		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 626 Stevens St.		Allocated Activity or Event Year-To-Date 398350.96	
City Indianapolis State IN Zip Code 46203	Category/ Type	Date 09 / 04 / 2014	
Purpose of Disbursement: Mileage and Supplies Reimbursement Activity or Event Identifier: Administrative		FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 13.98 + 79.23 = 93.21	

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.30879 Tim Berry		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 7629 Prairie View Dr.		Allocated Activity or Event Year-To-Date 398508.76	
City Indianapolis State IN Zip Code 46246	Category/ Type	Date 09 / 04 / 2014	
Purpose of Disbursement: Mileage Reimbursement Activity or Event Identifier: Administrative		FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 23.67 + 134.13 = 157.80	

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.30881 Douglas J. Boyle		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 5803 Dapple Trace		Allocated Activity or Event Year-To-Date 398530.60	
City Indianapolis State IN Zip Code 46228	Category/ Type	Date 09 / 04 / 2014	
Purpose of Disbursement: Supplies Reimbursement Activity or Event Identifier: Administrative		FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 3.28 + 18.56 = 21.84	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
40.93		231.92		272.85

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
[]	[]	[]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.30882**
Hunter Bisch
Mailing Address 2015 N. Weinbach Ave. Apt. 2C

City State Zip Code
Evansville IN 47711

Purpose of Disbursement:
Parking Reimbursement

Activity or Event Identifier:
Administrative

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
398562.60

Date / /

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.80		27.20		32.00

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.30917**
Walmart
Mailing Address 2373 E Main St.

City State Zip Code
Plainfield IN 46168

Purpose of Disbursement:
Office Supplies - Pd by T. Barclay

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
398562.60

Date / /

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.33		52.90		62.23

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.30918**
Dollar General
Mailing Address 235 N US Highway 31

City State Zip Code
New Whiteland IN 46184

Purpose of Disbursement:
Office Supplies - Pd by T. Barclay

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
398562.60

Date / /

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.43		2.46		2.89

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.80		27.20		32.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.30926 Martin's Supermarket Mailing Address 1200 N Nappanee St. City Elkhart State IN Zip Code 46514 Purpose of Disbursement: Office Supplies - Pd by V. Lynch Activity or Event Identifier: Administrative [MEMO ITEM]		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 398562.60 Date 09 / 04 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 2.18 + 12.35 = 14.53		

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.30927 Walmart Mailing Address 2373 E Main St. City Plainfield State IN Zip Code 46168 Purpose of Disbursement: Office Supplies - Pd by V. Lynch Activity or Event Identifier: Administrative [MEMO ITEM]		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 398562.60 Date 09 / 04 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 5.87 + 33.24 = 39.11		

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.30928 7-Eleven Mailing Address 27119 County Road 6 City Elkhart State IN Zip Code 46514 Purpose of Disbursement: Office Supplies - Pd by V. Lynch Activity or Event Identifier: Administrative [MEMO ITEM]		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 398562.60 Date 09 / 04 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 2.50 + 14.20 = 16.70		

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.30930
Family Dollar Store
Mailing Address 2301 W. Franklin St.

City State Zip Code
Elkhart IN 46516

Purpose of Disbursement:
Office Supplies - Pd by V. Lynch

Activity or Event Identifier:
Administrative
[MEMO ITEM]

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
398562.60

Date 09 / 04 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.16		0.91		1.07

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.30933
Walmart
Mailing Address 2373 E Main St.

City State Zip Code
Plainfield IN 46168

Purpose of Disbursement:
Office Supplies - Pd by D. Boyle

Activity or Event Identifier:
Administrative
[MEMO ITEM]

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
398562.60

Date 09 / 04 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.28		18.56		21.84

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.30938
Merchants Garage
Mailing Address 31 South Meridian St.

City State Zip Code
Indianapolis IN 46204

Purpose of Disbursement:
Parking Expense - Pd by H. Bisch

Activity or Event Identifier:
Administrative
[MEMO ITEM]

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
398562.60

Date 09 / 04 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.80		27.20		32.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.30858
Joe Fields
Mailing Address 32 Hyde Park Row
City Brownsburg State IN Zip Code 46112
Purpose of Disbursement: Technology Consultant
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 399362.60
Date 09 / 05 / 2014
FEDERAL SHARE 120.00 + NONFEDERAL SHARE 680.00 = TOTAL AMOUNT 800.00

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.30883
Republic Waste Services, Inc.
Mailing Address 832 Lansdale Avenue
City Indianapolis State IN Zip Code 46202
Purpose of Disbursement: Recycling Expense
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 399436.94
Date 09 / 05 / 2014
FEDERAL SHARE 11.15 + NONFEDERAL SHARE 63.19 = TOTAL AMOUNT 74.34

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.30884
Infinisource, Inc.
Mailing Address 15 E Washington Street
City Coldwater State MI Zip Code 49036
Purpose of Disbursement: Monthly Cobra Compliance Consult Fees
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 399489.02
Date 09 / 05 / 2014
FEDERAL SHARE 7.81 + NONFEDERAL SHARE 44.27 = TOTAL AMOUNT 52.08

SUBTOTAL of Allocated Federal and NonFederal Activity This Page
Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT
Values: 138.96, 787.46, 926.42

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))
Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Airnet		Transaction ID : H4.30891	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 11181			Allocated Activity or Event Year-To-Date 400362.57	
City Chattanooga	State TN	Zip Code 37401	Date 09 / 05 / 2014	
Purpose of Disbursement: Monthly Phone Equipment Rental Expense				
Activity or Event Identifier: Administrative		Category/ Type		
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
131.03			742.52	873.55

B. Full Name (Last, First, Middle Initial) AT&T Indiana		Transaction ID : H4.30904	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 240 North Meridian Street, Room 18			Allocated Activity or Event Year-To-Date 400606.85	
City Indianapolis	State IN	Zip Code 46204	Date 09 / 12 / 2014	
Purpose of Disbursement: Internet Data Lines				
Activity or Event Identifier: Administrative		Category/ Type		
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
36.64			207.64	244.28

C. Full Name (Last, First, Middle Initial) First Mile Technologies, Inc.		Transaction ID : H4.30905	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 750 Liberty Dr.			Allocated Activity or Event Year-To-Date 401286.77	
City Westfield	State IN	Zip Code 46074	Date 09 / 12 / 2014	
Purpose of Disbursement: Monthly Phone & Internet Expense				
Activity or Event Identifier: Administrative		Category/ Type		
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
101.99			577.93	679.92

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
269.66		1528.09		1797.75

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

Form A: LexisNexis. Transaction ID: H4.30906. Allocated Activity or Event: Administrative. Date: 09/12/2014. Total Amount: 150.00.

Form B: Kroger. Transaction ID: H4.30989. Allocated Activity or Event: Administrative. Date: 09/15/2014. Total Amount: 308.59.

Form C: Monarch Beverage Co. Transaction ID: H4.30992. Allocated Activity or Event: Administrative. Date: 09/15/2014. Total Amount: 239.69.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 22.50, 675.78, 698.28.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 22.50, 675.78, 698.28.

: 97 `A-G79 @C B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFH`G7 <98I @ `CF`-H9A-N5HCB

Form/Schedule: H4

Transaction ID : H4.30989

This entry is for a corporate in-kind we received for a state party staff event that did not raise any money nor have any federal candidate activity associated with it. Therefore I entered the in-kind as an administrative expense.

Form/Schedule: H4

Transaction ID: H4.30992

This entry is for a corporate in-kind we received for a state party staff event that did not raise any money nor have any federal candidate activity associated with it. Therefore I entered the in-kind as an administrative expense.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.30993 Zink Distributing Company LLC Mailing Address 3150 Shelby St.		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City State Zip Code Indianapolis IN 46227		Allocated Activity or Event Year-To-Date 402179.40	
Purpose of Disbursement: In-Kind-Catering for Non-Fundraiser, Non-Candidate State Party Event		Date MM / DD / YYYY 09 / 15 / 2014	
Activity or Event Identifier: Administrative		Category/Type	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 0.00 + 194.35 = 194.35			

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.30997 Indiana Republican Party State Fund Mailing Address 47 South Meridian Street, Ste 200		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City State Zip Code Indianapolis IN 46204		Allocated Activity or Event Year-To-Date 402290.79	
Purpose of Disbursement: Transfer of Federal Share of In-Kinds		Date MM / DD / YYYY 09 / 15 / 2014	
Activity or Event Identifier: Administrative		Category/Type	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 111.39 + 0.00 = 111.39			

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.30859 Vincent A. Lynch Mailing Address 626 Stevens St.		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City State Zip Code Indianapolis IN 46203		Allocated Activity or Event Year-To-Date 402367.76	
Purpose of Disbursement: Supplies Reimbursement		Date MM / DD / YYYY 09 / 18 / 2014	
Activity or Event Identifier: Administrative		Category/Type	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 11.55 + 65.42 = 76.97			

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
122.94		259.77		382.71

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`-H9A-N5HCB

Form/Schedule: H4

Transaction ID : H4.30993

This entry is for a corporate in-kind we received for a state party staff event that did not raise any money nor have any federal candidate activity associated with it. Therefore I entered the in-kind as an administrative expense.

Form/Schedule: H4

Transaction ID: H4.30997

This entry is the transfer of the federal share for corporate in-kinds we received for a state party staff event that did not raise any money nor have any federal candidate activity associated with it. Therefore I entered the transfer as an administrative expense.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.30860 Dakota Morris		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2127 Covert Ave.		Allocated Activity or Event Year-To-Date 402493.56	
City State Zip Code Evansville IN 47714	Category/ Type	Date <input type="text" value="09"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Mileage & Parking Reimbursement		Allocated Activity or Event Year-To-Date 402493.56	
Activity or Event Identifier: Administrative		Date <input type="text" value="09"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT		18.87 + 106.93 = 125.80	

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.30861 Wade Fenwick		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1150 Coppermill Ln. 1E		Allocated Activity or Event Year-To-Date 402525.56	
City State Zip Code Indianapolis IN 46234	Category/ Type	Date <input type="text" value="09"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Parking Reimbursement		Allocated Activity or Event Year-To-Date 402525.56	
Activity or Event Identifier: Administrative		Date <input type="text" value="09"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT		4.80 + 27.20 = 32.00	

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.30863 Hunter Bisch		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2015 N. Weinbach Ave. Apt. 2C		Allocated Activity or Event Year-To-Date 402657.56	
City State Zip Code Evansville IN 47711	Category/ Type	Date <input type="text" value="09"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Mileage Reimbursement		Allocated Activity or Event Year-To-Date 402657.56	
Activity or Event Identifier: Administrative		Date <input type="text" value="09"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT		19.80 + 112.20 = 132.00	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
43.47		246.33		289.80

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
43.47	246.33	289.80

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.30873
Khelley A. Adams
Mailing Address 215 S. Darling St.
City Angola State IN Zip Code 46703
Purpose of Disbursement: Mileage Reimbursement
Activity or Event Identifier: Administrative
Allocated Activity or Event: [X] Administrative [] Fundraising [] Exempt
[] Voter Drive [] Direct Candidate Support
[] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 403158.91
Date 09 / 18 / 2014
FEDERAL SHARE 17.19 + NONFEDERAL SHARE 97.41 = TOTAL AMOUNT 114.60

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.30878
Thomas Barclay
Mailing Address 2491 N. 400 W.
City Bargersville State IN Zip Code 46106
Purpose of Disbursement: Mileage & Supplies Reimbursement
Activity or Event Identifier: Administrative
Allocated Activity or Event: [X] Administrative [] Fundraising [] Exempt
[] Voter Drive [] Direct Candidate Support
[] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 403323.46
Date 09 / 18 / 2014
FEDERAL SHARE 24.68 + NONFEDERAL SHARE 139.87 = TOTAL AMOUNT 164.55

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.30880
Tim Berry
Mailing Address 7629 Prairie View Dr.
City Indianapolis State IN Zip Code 46246
Purpose of Disbursement: Mileage Reimbursement
Activity or Event Identifier: Administrative
Allocated Activity or Event: [X] Administrative [] Fundraising [] Exempt
[] Voter Drive [] Direct Candidate Support
[] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 403396.36
Date 09 / 18 / 2014
FEDERAL SHARE 10.94 + NONFEDERAL SHARE 61.96 = TOTAL AMOUNT 72.90

SUBTOTAL of Allocated Federal and NonFederal Activity This Page
FEDERAL SHARE 52.81 + NONFEDERAL SHARE 299.24 = TOTAL AMOUNT 352.05

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) CVS Pharmacy Mailing Address 801 N 1st Ave. City Evansville State IN Zip Code 47710 Purpose of Disbursement: Office Supplies - Pd by V. Lynch Activity or Event Identifier: Administrative [MEMO ITEM]		Transaction ID : H4.30941 Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 403559.26 Date 09 / 18 / 2014 Category/Type
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 1.48 + 8.40 = 9.88		

B. Full Name (Last, First, Middle Initial) Merchants Garage Mailing Address 31 South Meridian St. City Indianapolis State IN Zip Code 46204 Purpose of Disbursement: Parking Expense - Pd by D. Morris Activity or Event Identifier: Administrative [MEMO ITEM]		Transaction ID : H4.30945 Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 403559.26 Date 09 / 18 / 2014 Category/Type
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 2.40 + 13.60 = 16.00		

C. Full Name (Last, First, Middle Initial) Circle Center Mall Mailing Address 49 Maryland St. City Indianapolis State IN Zip Code 46204 Purpose of Disbursement: Parking Expense - Pd by W. Fenwick Activity or Event Identifier: Administrative [MEMO ITEM]		Transaction ID : H4.30946 Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 403559.26 Date 09 / 18 / 2014 Category/Type
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 4.80 + 27.20 = 32.00		

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.30950
Walmart
Mailing Address 2373 E Main St.
City Plainfield State IN Zip Code 46168
Purpose of Disbursement: Office Supplies - Pd by D. Boyle
Activity or Event Identifier: **Administrative**
[MEMO ITEM]

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 403559.26
Date: 09 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.55		14.43		16.98

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.30957
Walmart
Mailing Address 2373 E Main St.
City Plainfield State IN Zip Code 46168
Purpose of Disbursement: Office Supplies - Pd by Z. Potts
Activity or Event Identifier: **Administrative**
[MEMO ITEM]

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 403559.26
Date: 09 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.24		18.35		21.59

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.30958
Dollar General
Mailing Address 235 N US Highway 31
City New Whiteland State IN Zip Code 46184
Purpose of Disbursement: Office Supplies - Pd by T. Barclay
Activity or Event Identifier: **Administrative**
[MEMO ITEM]

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 403559.26
Date: 09 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.08		11.77		13.85

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.30959 Walmart Mailing Address 2373 E Main St. City Plainfield State IN Zip Code 46168 Purpose of Disbursement: Office Supplies - Pd by T. Barclay Activity or Event Identifier: Administrative [MEMO ITEM]		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 403559.26 Date 09 / 18 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 2.26 + 12.84 = 15.10		

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.30896 Salesforce.com Mailing Address PO Box 5126 City Carol Stream State IL Zip Code 60197 Purpose of Disbursement: Software Licenses Activity or Event Identifier: Administrative		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 406423.36 Date 09 / 19 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 429.61 + 2434.49 = 2864.10		

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.30897 First Mile Technologies, Inc. Mailing Address 750 Liberty Dr. City Westfield State IN Zip Code 46074 Purpose of Disbursement: Monthly Phone Expense Activity or Event Identifier: Administrative		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 406433.29 Date 09 / 19 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 1.49 + 8.44 = 9.93		

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
431.10		2442.93		2874.03

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
[]	[]	[]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.30899 Joe Fields		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 32 Hyde Park Row		Allocated Activity or Event Year-To-Date 407713.29	
City Brownsburg State IN Zip Code 46112	Date <input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>		
Purpose of Disbursement: Monthly IT Consulting	Category/Type <input type="text"/>		
Activity or Event Identifier: Administrative			
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
192.00		1088.00	1280.00

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.30900 TelSpan, Inc.		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 101 W Washington St, Suite 1301		Allocated Activity or Event Year-To-Date 407719.91	
City Indianapolis State IN Zip Code 46204	Date <input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>		
Purpose of Disbursement: Conference Calls	Category/Type <input type="text"/>		
Activity or Event Identifier: Administrative			
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
0.99		5.63	6.62

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.30901 The Conference Group LLC		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 254 Chapman Rd, Suite 200		Allocated Activity or Event Year-To-Date 407838.07	
City Newark State DE Zip Code 19702	Date <input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>		
Purpose of Disbursement: Conference Calls	Category/Type <input type="text"/>		
Activity or Event Identifier: Administrative			
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
17.72		100.44	118.16

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
210.71		1194.07		1404.78

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.30902
OneSource Water
Mailing Address 1060 N Capitol Ave. Suite E310
City Indianapolis State IN Zip Code 46204
Purpose of Disbursement: Water Rental Expense
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 407919.08
Date 09/19/2014
FEDERAL SHARE 12.15 + NONFEDERAL SHARE 68.86 = TOTAL AMOUNT 81.01

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.30903
Comcast
Mailing Address 11988 Exit Five Parkway
City Fishers State IN Zip Code 46038
Purpose of Disbursement: Internet Expense
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 408279.14
Date 09/19/2014
FEDERAL SHARE 54.01 + NONFEDERAL SHARE 306.05 = TOTAL AMOUNT 360.06

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.30893
Crossroads Bank
Mailing Address PO Box 259
City Wabash State IN Zip Code 46992
Purpose of Disbursement: Copier Rental
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 408376.51
Date 09/25/2014
FEDERAL SHARE 14.61 + NONFEDERAL SHARE 82.76 = TOTAL AMOUNT 97.37

SUBTOTAL of Allocated Federal and NonFederal Activity This Page
FEDERAL SHARE 80.77 + NONFEDERAL SHARE 457.67 = TOTAL AMOUNT 538.44

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.30894 AT&T Indiana		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 240 North Meridian Street, Room 18		Allocated Activity or Event Year-To-Date 408418.57	
City State Zip Code Indianapolis IN 46204	Category/ Type	Date MM / DD / YYYY 09 / 26 / 2014	
Purpose of Disbursement: Security System Phone Line		Allocated Activity or Event Year-To-Date 408418.57	
Activity or Event Identifier: Administrative			
FEDERAL SHARE	+	NONFEDERAL SHARE	=
6.31		35.75	42.06

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.30895 Chase Card Services		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 94014		Allocated Activity or Event Year-To-Date 411520.04	
City State Zip Code Palatine IL 60094	Category/ Type	Date MM / DD / YYYY 09 / 26 / 2014	
Purpose of Disbursement: Credit Card: See Below		Allocated Activity or Event Year-To-Date 411520.04	
Activity or Event Identifier: Administrative			
FEDERAL SHARE	+	NONFEDERAL SHARE	=
465.22		2636.25	3101.47

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.30971 FedEx - Tennessee		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 1140		Allocated Activity or Event Year-To-Date 411520.04	
City State Zip Code Memphis TN 38101	Category/ Type	Date MM / DD / YYYY 09 / 26 / 2014	
Purpose of Disbursement: Shipping Expense		Allocated Activity or Event Year-To-Date 411520.04	
Activity or Event Identifier: Administrative [MEMO ITEM]			
FEDERAL SHARE	+	NONFEDERAL SHARE	=
4.24		24.01	28.25

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
471.53		2672.00		3143.53

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
[]	[]	[]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.30972
Stamps.com
Mailing Address 12959 Coral Tree Place

City State Zip Code
Los Angeles CA 90066

Purpose of Disbursement:
Monthly Postage Software

Activity or Event Identifier:
Administrative
[MEMO ITEM]

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
411520.04

Date 09 / 26 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.70		15.29		17.99

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.30973
Millennium Knickerbocker Chicago
Mailing Address 163 E. Walton Place

City State Zip Code
Chicago IL 60611

Purpose of Disbursement:
Lodging Expense

Activity or Event Identifier:
Administrative
[MEMO ITEM]

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
411520.04

Date 09 / 26 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.50		110.50		130.00

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.30974
Capital Grille
Mailing Address 40 W Washington Street

City State Zip Code
Indianapolis IN 46204

Purpose of Disbursement:
Meals Expense

Activity or Event Identifier:
Administrative
[MEMO ITEM]

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
411520.04

Date 09 / 26 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.77		95.04		111.81

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.30975
One South Restaurant
Mailing Address One South Capitol Ave.
City Indianapolis State IN Zip Code 46204
Purpose of Disbursement: Meals Expense
Activity or Event Identifier: Administrative
[MEMO ITEM]

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
411520.04

Date 09 / 26 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
46.50		263.50		310.00

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.30977
The Cheesecake Factory
Mailing Address 8702 Keystone Crossing 4A
City Indianapolis State IN Zip Code 46240
Purpose of Disbursement: Meals Expense
Activity or Event Identifier: Administrative
[MEMO ITEM]

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
411520.04

Date 09 / 26 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.40		30.60		36.00

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.30980
Bandwith.com Inc.
Mailing Address 900 Main Camput Dr.
City Raleigh State NC Zip Code 27606
Purpose of Disbursement: Monthly Software Expense
Activity or Event Identifier: Administrative
[MEMO ITEM]

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
411520.04

Date 09 / 26 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.93		22.26		26.19

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full) INDIANA REPUBLICAN STATE COMMITTEE, INC.

Form A: Full Name (Last, First, Middle Initial) Transaction ID : H4.30981 Allocated Activity or Event: Administrative [checked] Fundraising [] Exempt [] Voter Drive [] Direct Candidate Support [] Public Comm (ref to party only) by PAC [] Mailing Address 1009 Think Place City Morrisville State NC Zip Code 27560 Purpose of Disbursement: Computer Hardware Activity or Event Identifier: Administrative [MEMO ITEM] Allocated Activity or Event Year-To-Date 411520.04 Date 09 / 26 / 2014 FEDERAL SHARE 219.56 + NONFEDERAL SHARE 1244.19 = TOTAL AMOUNT 1463.75

Form B: Full Name (Last, First, Middle Initial) Transaction ID : H4.30983 Allocated Activity or Event: Administrative [checked] Fundraising [] Exempt [] Voter Drive [] Direct Candidate Support [] Public Comm (ref to party only) by PAC [] Mailing Address 2850 Dupont Commerce Ct. City Ft Wayne State IN Zip Code 46825 Purpose of Disbursement: Lodging Expense Activity or Event Identifier: Administrative [MEMO ITEM] Allocated Activity or Event Year-To-Date 411520.04 Date 09 / 26 / 2014 FEDERAL SHARE 105.39 + NONFEDERAL SHARE 597.20 = TOTAL AMOUNT 702.59

Form C: Full Name (Last, First, Middle Initial) Transaction ID : H4.30985 Allocated Activity or Event: Administrative [checked] Fundraising [] Exempt [] Voter Drive [] Direct Candidate Support [] Public Comm (ref to party only) by PAC [] Mailing Address 345 Park Ave. City San Jose State CA Zip Code 95110 Purpose of Disbursement: Monthly Software Expense Activity or Event Identifier: Administrative [MEMO ITEM] Allocated Activity or Event Year-To-Date 411520.04 Date 09 / 26 / 2014 FEDERAL SHARE 11.23 + NONFEDERAL SHARE 63.66 = TOTAL AMOUNT 74.89

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [], [], []

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.30986 U.S. Postal Service		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 125 W. South St.		Allocated Activity or Event Year-To-Date 411520.04	
City Indianapolis State IN Zip Code 46206	Date MM / DD / YYYY 09 / 26 / 2014		
Purpose of Disbursement: Postage Expense	Allocated Activity or Event Year-To-Date 411520.04		
Activity or Event Identifier: Administrative [MEMO ITEM]	Category/Type		
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
30.00 + 170.00 = 200.00			

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.30892 Crossroads Bank		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 259		Allocated Activity or Event Year-To-Date 413451.39	
City Wabash State IN Zip Code 46992	Date MM / DD / YYYY 09 / 28 / 2014		
Purpose of Disbursement: Copier Rental	Allocated Activity or Event Year-To-Date 413451.39		
Activity or Event Identifier: Administrative	Category/Type		
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
289.70 + 1641.65 = 1931.35			

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.30890 Old National Bancorp		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 718		Allocated Activity or Event Year-To-Date 413617.80	
City Evansville State IN Zip Code 47705	Date MM / DD / YYYY 09 / 30 / 2014		
Purpose of Disbursement: Bank Fees	Allocated Activity or Event Year-To-Date 413617.80		
Activity or Event Identifier: Administrative	Category/Type		
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
24.96 + 141.45 = 166.41			

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
314.66		1783.10		2097.76

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
8041.13		45677.90		53719.03