

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

RECEIVED  
2012 OCT 15 AM 10:50  
FEC MAIL CENTER  
Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

InfoCision Management Corporation PAC

ADDRESS (number and street) 325 Springside Drive

Check if different than previously reported. (ACC)  
Akron OH 44333

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C 00407098

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)
  - Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)
  - Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P)  General (12G)  Runoff (12R)
  - Convention (12C)  Special (12S)

Election on            /            /            in the State of           

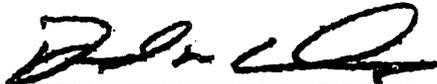
- (d) 30-Day POST-Election Report for the:
- General (30G)  Runoff (30R)  Special (30S)

Election on            /            /            in the State of           

5. Covering Period 7 / 1 / 2012 through 9 / 30 / 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer David M. Hamrick

Signature of Treasurer 

Date 10 / 11 / 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only									
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**FEC FORM 3X**  
Rev. 12/2004

12039902647

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

InfoCision Management Corporation PAC

Report Covering the Period:

From:

7 / 1 / 2012

To:

9 / 30 / 2012

12030902648

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <u>2012</u>	<u>12,492.63</u>	<u>12,492.63</u>
(b) Cash on Hand at Beginning of Reporting Period.....	<u>11,257.63</u>	
(c) Total Receipts (from Line 19).....	<u>735.00</u>	<u>2,100.00</u>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<u>11,992.63</u>	<u>14,592.63</u>
7. Total Disbursements (from Line 31).....	<u>138.74</u>	<u>2,738.74</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<u>11,853.89</u>	<u>11,853.89</u>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<u>-0-</u>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<u>-0-</u>	

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

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

InfoCision Management Corporation PAC

Report Covering the Period: From:

7 / 1 / 2012

To:

9 / 30 / 2012

**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).....

735.00

2,100.00

(ii) Unitemized.....

-0-

-0-

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

735.00

2,100.00

(b) Political Party Committees.....

-0-

-0-

(c) Other Political Committees (such as PACs).....

-0-

-0-

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

735.00

2,100.00

12. Transfers From Affiliated/Other Party Committees.....

-0-

-0-

13. All Loans Received.....

-0-

-0-

14. Loan Repayments Received.....

-0-

-0-

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

-0-

-0-

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

-0-

-0-

17. Other Federal Receipts (Dividends, Interest, etc.).....

-0-

-0-

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

-0-

-0-

(b) Levin Funds (from Schedule H5).....

-0-

-0-

(c) Total Transfers (add 18(a) and 18(b))..

-0-

-0-

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

735.00

2,100.00

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

-0-

-0-

12030902649

**DETAILED SUMMARY PAGE  
of Disbursements**

FEC Form 3X (Rev. 02/2009)

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 .....

-0-

-0-

(ii) Non-Federal Share .....

-0-

-0-

(b) Other Federal Operating  
Expenditures .....

-0-

-0-

(c) Total Operating Expenditures  
(add 21(a)(i), (a)(ii), and (b)) ▶

-0-

-0-

22. Transfers to Affiliated/Other Party  
Committees .....

-0-

-0-

23. Contributions to  
Federal Candidates/Committees  
and Other Political Committees .....

138.74

2,738.74

24. Independent Expenditures  
(use Schedule E) .....

-0-

-0-

25. Coordinated Party Expenditures  
(2 U.S.C. §441a(d))  
(use Schedule F) .....

-0-

-0-

26. Loan Repayments Made .....

-0-

-0-

27. Loans Made .....

-0-

-0-

28. Refunds of Contributions To:  
(a) Individuals/Persons Other  
Than Political Committees .....

-0-

-0-

(b) Political Party Committees .....

-0-

-0-

(c) Other Political Committees  
(such as PACs) .....

-0-

-0-

(d) Total Contribution Refunds  
(add Lines 28(a), (b), and (c)) ▶

-0-

-0-

29. Other Disbursements .....

-0-

-0-

30. Federal Election Activity (2 U.S.C. §431(20))

(a) Allocated Federal Election Activity  
(from Schedule H6)

(i) Federal Share .....

-0-

-0-

(ii) "Levin" Share .....

-0-

-0-

(b) Federal Election Activity Paid Entirely  
With Federal Funds .....

-0-

-0-

(c) Total Federal Election Activity (add  
Lines 30(a)(i), 30(a)(ii) and 30(b)) ▶

-0-

-0-

31. Total Disbursements (add Lines 21(c), 22,  
23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..

138.74

2,738.74

32. Total Federal Disbursements  
(subtract Line 21(a)(ii) and Line 30(a)(ii)  
from Line 31) ▶

-0-

-0-

12030902650

**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) .....	735.00	2,100.00
34. Total Contribution Refunds (from Line 28(d)) .....	-0-	-0-
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	-0-	-0-
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	-0-	-0-
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	-0-	-0-
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	-0-	-0-

12030902651

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

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

FOR LINE NUMBER: PAGE OF  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/>

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)

InfoCision Management Corporation PAC

Full Name (Last, First, Middle Initial)

A. Brubkaer, Steve

Mailing Address

75 Burton Drive

City

Munroe Falls

State

OH

Zip Code

44262

FEC ID number of contributing federal political committee.

C 00407098

Name of Employer

InfoCision Management Corp.

Occupation

Sr. VP

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

1,000.00

Date of Receipt

9 30 2012

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

B. Talabec, Andrew

Mailing Address

451 Rockglen Drive

City

Wadsworth,

State

OH

Zip Code

44281

FEC ID number of contributing federal political committee.

C 00407098

Name of Employer

InfoCision Management Corp.

Occupation

Account Executive

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

9 30 2012

Amount of Each Receipt this Period

140.00

Full Name (Last, First, Middle Initial)

C. Parker, Tina

Mailing Address

3475 Breeze Knoll Drive

City

Youngstown,

State

OH

Zip Code

44505

FEC ID number of contributing federal political committee.

C 00407098

Name of Employer

InfoCision Management Corp

Occupation

Call Center Manager

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

60.00

Date of Receipt

9 30 2012

Amount of Each Receipt this Period

21.00

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

511.00

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

12030902652

**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	OF
	<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

12030902653

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)  
**InfoCision Management Corporation PAC**

Full Name (Last, First, Middle Initial) <b>A. Campbell, Wayne</b>		Date of Receipt <b>9 30 2012</b>
Mailing Address <b>6603 Valleyvista Drive</b>		Amount of Each Receipt this Period <b>70.00</b>
City <b>Mayfield Heights</b>	State Zip Code <b>OH 44124</b>	
FEC ID number of contributing federal political committee. <b>C 00407098</b>		Aggregate Year-to-Date ▼ <b>200.00</b>
Name of Employer <b>InfoCision Management Corp.</b>	Occupation <b>Product Support Engineer</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Kingsburg, Fred</b>		Date of Receipt <b>9 30 2012</b>
Mailing Address <b>1309 Perry Drive NW</b>		Amount of Each Receipt this Period <b>70.00</b>
City <b>Canton,</b>	State Zip Code <b>OH 44708</b>	
FEC ID number of contributing federal political committee. <b>C 00407098</b>		Aggregate Year-to-Date ▼ <b>200.00</b>
Name of Employer <b>InfoCision Management Corp.</b>	Occupation <b>Sr. Program Supervisor</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Sun, Roy</b>		Date of Receipt <b>9 30 2012</b>
Mailing Address <b>1227 Meadow Run</b>		Amount of Each Receipt this Period <b>14.00</b>
City <b>Copley</b>	State Zip Code <b>OH 44321</b>	
FEC ID number of contributing federal political committee. <b>C 00407098</b>		Aggregate Year-to-Date ▼ <b>40.00</b>
Name of Employer <b>InfoCision Management Corp.</b>	Occupation <b>Application Developer</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>154.00</b>
<b>TOTAL</b> 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	OF
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**InfoCision Management Corporation PAC**

**A.** Full Name (Last, First, Middle Initial)  
**Bennington, Lois**

Mailing Address  
**7447 Jimmie Street SW**

City State Zip Code  
**Massillon OH 44646**

FEC ID number of contributing federal political committee.  
**C 0-0407-098**

Name of Employer Occupation  
**InfoCision Management Corp. Sr. Data Analyst**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**100.00**

Date of Receipt  
**9 / 30 / 2012**

Amount of Each Receipt this Period  
**35.00**

**B.** Full Name (Last, First, Middle Initial)  
**Rothrock, Diane**

Mailing Address  
**641 Hampton Ridge Drive**

City State Zip Code  
**Akron OH 44313**

FEC ID number of contributing federal political committee.  
**C 0-0407-098**

Name of Employer Occupation  
**InfoCision Management Corp. Executive Assistant**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**100.00**

Date of Receipt  
**9 / 30 / 2012**

Amount of Each Receipt this Period  
**35.00**

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.  
**C 0-0407-098**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....	<b>70.00</b>
TOTAL This Period (last page this line number only).....	<b>735.00</b>

12030902654

**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)

PAGE OF

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

InfoCision Management Corporation PAC

Full Name (Last, First, Middle Initial)

A.

Citizens for Dordea Committee

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

7 / 24 / 2012

Amount of Each Disbursement this Period

100.00

B.

check order charge

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

8 / 31 / 2012

Amount of Each Disbursement this Period

38.74

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

Amount of Each Disbursement this Period

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

138.74

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

138.74

12030902655

**SCHEDULE C (FEC Form 3X)  
LOANS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE      OF
	FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)  
**InfoCision Management Corporation PAC**

LOAN SOURCE Full Name (Last, First, Middle Initial)	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Mailing Address		
City	State	ZIP Code
Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
		% (apr)	<input type="checkbox"/> Yes <input type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City      State      ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City      State      ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City      State      ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City      State      ZIP Code	Amount Guaranteed Outstanding:

<b>SUBTOTALS</b> This Period This Page (optional) .....	0-
<b>TOTALS</b> This Period (last page in this line only) .....	0-

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

12030902650

**SCHEDULE C-1 (FEC Form 3X)  
LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS**

Federal Election Commission, Washington, D.C. 20463

Supplementary for  
Information found on  
Page \_\_\_\_ of Schedule C

NAME OF COMMITTEE (In Full)  InfoCision Management Corporation PAC	FEC IDENTIFICATION NUMBER C
--	--------------------------------

LENDING INSTITUTION (LENDER) Full Name	Amount of Loan -	Interest Rate (APR) %
Mailing Address	Date Incurred or Established	
City State Zip Code	Date Due	

A. Has loan been restructured?  No  Yes If yes, date originally incurred

B. If line of credit, Amount of this Draw: Total Outstanding Balance:

C. Are other parties secondarily liable for the debt incurred?  
 No  Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?  
 No  Yes If yes, specify: What is the value of this collateral?  
Does the lender have a perfected security interest in it?  No  Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan?  No  Yes If yes, specify: What is the estimated value?

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2). Location of account:  
Date account established: Address:  
City, State, Zip:

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.

G. COMMITTEE TREASURER Typed Name Signature	DATE
---	------

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:  
I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.  
II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.  
III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.

AUTHORIZED REPRESENTATIVE Typed Name Signature	DATE
Title	

12030902657

**SCHEDULE D (FEC Form 3X)  
DEBTS AND OBLIGATIONS  
Excluding Loans**

12030902658

NAME OF COMMITTEE (In Full)  
**InfoCision Management Corporation PAC**

A. 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		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

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		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

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		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional).....▶	-0-
2) TOTALS This Period (last page this line number only).....▶	-0-
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....▶	-0-
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)▶	-0-

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <u>InfoCision Management Corporation PAC</u>	FEC IDENTIFICATION NUMBER <u>C</u>
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle Initial) of Payee	Date [ ][ ] / [ ][ ] / [ ][ ][ ][ ]
Mailing Address	Amount [ ][ ][ ][ ]
City State Zip Code	
Purpose of Expenditure	Category/Type [ ][ ][ ][ ]
Name of Federal Candidate Supported or Opposed by Expenditure:	
Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought [ ][ ][ ][ ]	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee	Date [ ][ ] / [ ][ ] / [ ][ ][ ][ ]
Mailing Address	Amount [ ][ ][ ][ ]
City State Zip Code	
Purpose of Expenditure	Category/Type [ ][ ][ ][ ]
Name of Federal Candidate Supported or Opposed by Expenditure:	
Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought [ ][ ][ ][ ]	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures .....	[ ][ ][ ][ ] - 0
(b) SUBTOTAL of Unitemized Independent Expenditures .....	[ ][ ][ ][ ] - 0
(c) TOTAL Independent Expenditures .....	[ ][ ][ ][ ] - 0

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature \_\_\_\_\_

Date \_\_\_\_\_

12030902659

**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)

PAGE OF  
 FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full)  <b>InfoCision Management Corporation PAC</b>	<input type="checkbox"/> Check if <input type="checkbox"/> 24-hour notice
---	--

Has your committee been designated to make coordinated expenditures by a political party committee? <input type="checkbox"/> YES <input 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	Purpose of Expenditure	Category/Type
Mailing Address	Date	
City State ZIP Code		
Name of Federal Candidate Supported	Office Sought: House Senate Presidential	State: District: Amount
Aggregate General Election Expenditure for this Candidate ▶	Limit Raised Due to Opponent's Spending (2 U.S.C. §441a(i)/441a-1)	

Full Name (Last, First, Middle Initial) of Each Payee	Purpose of Expenditure	Category/Type
Mailing Address	Date	
City State ZIP Code		
Name of Federal Candidate Supported	Office Sought: House Senate Presidential	State: District: Amount
Aggregate General Election Expenditure for this Candidate ▶	Limit Raised Due to Opponent's Spending (2 U.S.C. §441a(i)/441a-1)	

Full Name (Last, First, Middle Initial) of Each Payee	Purpose of Expenditure	Category/Type
Mailing Address	Date	
City State ZIP Code		
Name of Federal Candidate Supported	Office Sought: House Senate Presidential	State: District: Amount
Aggregate General Election Expenditure for this Candidate ▶	Limit Raised Due to Opponent's Spending (2 U.S.C. §441a(i)/441a-1)	

SUBTOTAL of Expenditures This Page (optional).....▶	0-
TOTAL This Period (last page this line number only).....▶	0-

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SCHEDULE H1 (FEC Form 3X)

METHOD OF ALLOCATION FOR:

- ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS
- ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE) (Separate Segregated Funds And Nonconnected Committees Only)

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NAME OF COMMITTEE (In Full)

USE ONLY ONE SECTION, A or B

A. State and Local Party Committees

Fixed Percentage (select one)

- \_\_\_\_\_ Presidential-Only Election Year (28% Federal)
- \_\_\_\_\_ Presidential and Senate Election Year (36% Federal)
- \_\_\_\_\_ Senate-Only Election Year (21% Federal)
- \_\_\_\_\_ Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees

Flat Minimum Federal Percentage

If the committee will allocate using the flat minimum percentage of 50% federal funds, check  or

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... %

Nonfederal..... %

This ratio applies to (check all that apply):

- Administrative
- Generic Voter Drive
- Public Communications Referencing Party Only

**SCHEDULE H2 (FEC Form 3X)  
ALLOCATION RATIOS**

PAGE OF

NAME OF COMMITTEE (In Full)  
InfoCision Management Corporation PAC

**RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT  
ACTIVITIES APPEARING ON THIS REPORT.**

Methods of allocation:

- I. FUNDRAISING activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared DIRECT CANDIDATE SUPPORT activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity. For PACs Only: Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

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ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	_____ % 0	_____ % 0
ACTIVITY OR EVENT IDENTIFIER _____ ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	_____ % 0	_____ % 0
ACTIVITY OR EVENT IDENTIFIER _____ ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	_____ % 0	_____ % 0
ACTIVITY OR EVENT IDENTIFIER _____ ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	_____ % 0	_____ % 0
ACTIVITY OR EVENT IDENTIFIER _____ ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	_____ % 0	_____ % 0
ACTIVITY OR EVENT IDENTIFIER _____ ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	_____ % 0	_____ % 0

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

NAME OF COMMITTEE (In Full)

InfoCision Management Corporation PAC

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED

**BREAKDOWN OF TRANSFER RECEIVED**

i) Total Administrative .....		-0-
ii) Generic Voter Drive .....		-0-
iii) Exempt Activities.....		-0-
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		-0-
b) _____		-0-
c) Total Amount Transferred For Direct Fundraising .....		-0-
v) Direct Candidate Support (List Activity or Event Identifier)		
a) _____		-0-
b) _____		-0-
c) Total Amount Transferred For Direct Candidate Support.....		-0-
vi) Public Communications Referring Only to Party (Made by PAC) .....		-0-

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

TOTAL This Period (Administrative) .....	-0-
TOTAL This Period (Generic Voter Drive) .....	-0-
TOTAL This Period (Exempt Activities) .....	-0-
TOTAL This Period (Direct Fundraising) .....	-0-
TOTAL This Period (Direct Candidate Support) .....	-0-
TOTAL This Period (Public Communications Referring Only to Party) .....	-0-
TOTAL This Period (Total Amount Transferred).....	-0-

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**SCHEDULE H5 (FEC Form 3X)**

**TRANSFERS OF LEVIN FUNDS RECEIVED FOR ALLOCATED FEDERAL ELECTION ACTIVITY**

(To be used by State, District and Local Party Committees Only)

PAGE OF  
FOR LINE 18b OF FORM 3X

12030902665

NAME OF COMMITTEE (In Full)  
InfoCision Management Corporation PAC

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED

**BREAKDOWN OF THIS TRANSFER**

- i) **Voter Registration**  
Total Amount Transferred for Voter Registration.....
- ii) **Voter ID**  
Total Amount Transferred for Voter ID .....
- iii) **GOTV**  
Total Amount Transferred for GOTV .....
- iv) **Generic Campaign Activity**  
Total Amount Transferred for Generic Campaign Activity .....

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED

**BREAKDOWN OF THIS TRANSFER**

- i) **Voter Registration**  
Total Amount Transferred for Voter Registration.....
- ii) **Voter ID**  
Total Amount Transferred for Voter ID .....
- iii) **GOTV**  
Total Amount Transferred for GOTV .....
- iv) **Generic Campaign Activity**  
Total Amount Transferred for Generic Campaign Activity .....

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED (Last Page Only)**

TOTAL This Period (Voter Registration).....	<input type="text" value=""/>	-0-
TOTAL This Period (Voter ID) .....	<input type="text" value=""/>	-0-
TOTAL This Period (GOTV).....	<input type="text" value=""/>	-0-
TOTAL This Period (Generic Campaign Activity).....	<input type="text" value=""/>	-0-
TOTAL This Period (Total Amount of Transfers Received).....	<input type="text" value=""/>	-0-

**SCHEDULE H6 (FEC Form 3X)  
DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS  
FOR ALLOCATED FEDERAL ELECTION ACTIVITY  
(To be used by State, District and Local Party Committees Only)**

NAME OF COMMITTEE (In Full)  
InfoCision Management Corporation PAC

12050902666

A. Full Name (Last, First, Middle Initial) / Full Organization Name		Type of Allocated Activity or Event: <input type="checkbox"/> Voter Registration <input type="checkbox"/> GOTV <input type="checkbox"/> Voter ID <input type="checkbox"/> Generic Campaign	
Mailing Address		Allocated Activity or Event Year-To-Date	
City	State	Zip Code	Date
Purpose of Disbursement		Category/Type	
FEDERAL SHARE	+	LEVIN SHARE	= TOTAL AMOUNT
			-0-

B. Full Name (Last, First, Middle Initial) / Full Organization Name		Type of Allocated Activity or Event: <input type="checkbox"/> Voter Registration <input type="checkbox"/> GOTV <input type="checkbox"/> Voter ID <input type="checkbox"/> Generic Campaign	
Mailing Address		Allocated Activity or Event Year-To-Date	
City	State	Zip Code	Date
Purpose of Disbursement		Category/Type	
FEDERAL SHARE	+	LEVIN SHARE	= TOTAL AMOUNT

C. Full Name (Last, First, Middle Initial) / Full Organization Name		Type of Allocated Activity or Event: <input type="checkbox"/> Voter Registration <input type="checkbox"/> GOTV <input type="checkbox"/> Voter ID <input type="checkbox"/> Generic Campaign	
Mailing Address		Allocated Activity or Event Year-To-Date	
City	State	Zip Code	Date
Purpose of Disbursement		Category/Type	
FEDERAL SHARE	+	LEVIN SHARE	= TOTAL AMOUNT

SUBTOTAL of Shared Federal and Levin Activity This Page			
FEDERAL SHARE	+	LEVIN SHARE	= TOTAL AMOUNT
-0-		-0-	-0-
TOTAL This Period (last page for each line only)(Federal share to 30(a)(i) and Levin share to 30(a)(ii))			
FEDERAL SHARE		LEVIN SHARE	TOTAL AMOUNT
-0-		-0-	-0-
TOTAL This Period for the Levin Share			
		-0-	

**SCHEDULE L (FEC Form 3X)**  
**AGGREGATION PAGE: LEVIN FUNDS**

12030902667

NAME OF COMMITTEE (In Full) <u>InfoCision Management Corporation PAC</u>
NAME OF ACCOUNT

	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
<b>1. RECEIPTS FROM PERSONS</b>		
(a) Itemized ..... (Use Schedule L-A)	-0-	-0-
(b) Unitemized .....	-0-	-0-
(c) Total .....	-0-	-0-
<b>2. OTHER RECEIPTS .....</b>	-0-	-0-
<b>3. TOTAL RECEIPTS .....</b> (Add Lines 1c and 2)	-0-	-0-
<b>4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT</b> (Use Schedule L-B)		
(a) Voter Registration .....	-0-	-0-
(b) Voter ID .....	-0-	-0-
(c) GOTV .....	-0-	-0-
(d) Generic Campaign .....	-0-	-0-
(e) Total .....	-0-	-0-
<b>5. OTHER DISBURSEMENTS .....</b>	-0-	-0-
<b>6. TOTAL DISBURSEMENTS .....</b> (Add Lines 4e and 5)	-0-	-0-
<b>7. BEGINNING CASH ON HAND .....</b> (for Column B, use cash as of January 1st)	-0-	-0-
<b>8. RECEIPTS .....</b> (from Line 3)	-0-	-0-
<b>9. SUBTOTAL .....</b> (Add Lines 7 and 8)	-0-	-0-
<b>10. DISBURSEMENTS .....</b> (From Line 6)	-0-	-0-
<b>11. ENDING CASH ON HAND .....</b> (Subtract Line 10 From Line 9)	-0-	-0-



**SCHEDULE L-B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**  
**OF LEVIN FUNDS**

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

FOR LINE NUMBER: PAGE OF

<input type="checkbox"/> 4a	<input type="checkbox"/> 4c	<input type="checkbox"/> 5
<input type="checkbox"/> 4b	<input type="checkbox"/> 4d	

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)  
 InfoCision Management Corporation PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) / Full Organization Name	Date of Disbursement
	Mailing Address	
	City State Zip Code	Amount of Each Disbursement this Period
	Purpose of Disbursement	
<b>B.</b>	Full Name (Last, First, Middle Initial) / Full Organization Name	Date of Disbursement
	Mailing Address	
	City State Zip Code	Amount of Each Disbursement this Period
	Purpose of Disbursement	
<b>C.</b>	Full Name (Last, First, Middle Initial) / Full Organization Name	Date of Disbursement
	Mailing Address	
	City State Zip Code	Amount of Each Disbursement this Period
	Purpose of Disbursement	
<b>D.</b>	Full Name (Last, First, Middle Initial) / Full Organization Name	Date of Disbursement
	Mailing Address	
	City State Zip Code	Amount of Each Disbursement this Period
	Purpose of Disbursement	
<b>E.</b>	Full Name (Last, First, Middle Initial) / Full Organization Name	Date of Disbursement
	Mailing Address	
	City State Zip Code	Amount of Each Disbursement this Period
	Purpose of Disbursement	

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

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

12030902669

5546 PAC

#108

58-55/412  
13370

DATE 7-29-19

PAY TO THE ORDER OF Citizens for Deafness Committee

\$ 100<sup>00</sup>

One hundred dollars <sup>00</sup>/<sub>100</sub>

DOLLARS

FIRSTMERIT Tower Office

www.firstmerit.com

FOR



[Redacted area]

12030902670

12030902671

Month	Donor	Amt
July	Lois Bennington	15.00
July	Steve Brubaker	150.00
July	Wayne Campbell	30.00
July	Fred Kingsbury	30.00
July	Tina Parker	9.00
July	Diane Rothrock	15.00
July	Roy Sun	6.00
July	Andrew L Talabac	60.00
August	Lois Bennington	10.00
August	Steve Brubaker	100.00
August	Wayne Campbell	20.00
August	Fred Kingsbury	20.00
August	Tina Parker	6.00
August	Diane Rothrock	10.00
August	Roy Sun	4.00
August	Andrew L Talabac	40.00
September	Lois Bennington	10.00
September	Steve Brubaker	100.00
September	Wayne Campbell	20.00
September	Fred Kingsbury	20.00
September	Tina Parker	6.00
September	Diane Rothrock	10.00
September	Roy Sun	4.00
September	Andrew L Talabac	40.00
	<b>Total</b>	<b>735.00</b>

InfoCision PAC Filing - July - September 2012  
Employee Contribution Summary

Sum of Amt Donor	April - June Total			Grand Total
	July	August	September	
Lois Bennington	15.00	10.00	10.00	35.00
Steve Brubaker	150.00	100.00	100.00	350.00
Wayne Campbell	30.00	20.00	20.00	70.00
Fred Kingsbury	30.00	20.00	20.00	70.00
Tina Parker	9.00	6.00	6.00	21.00
Diane Rothrock	15.00	10.00	10.00	35.00
Roy Sun	6.00	4.00	4.00	14.00
Andrew L Talabac	60.00	40.00	40.00	140.00
<b>Grand Total</b>	<b>315.00</b>	<b>210.00</b>	<b>210.00</b>	<b>735.00</b>

Sum of Amt Donor	January - June Total			Grand Total
	QTR 1	QTR 2	QTR 3	
Lois Bennington	35.00	30.00	35.00	100.00
Steve Brubaker	350.00	300.00	350.00	1,000.00
Wayne Campbell	70.00	60.00	70.00	200.00
Fred Kingsbury	70.00	60.00	70.00	200.00
Tina Parker	21.00	18.00	21.00	60.00
Diane Rothrock	35.00	30.00	35.00	100.00
Roy Sun	14.00	12.00	14.00	40.00
Andrew L Talabac	140.00	120.00	140.00	400.00
<b>Grand Total</b>	<b>735.00</b>	<b>630.00</b>	<b>735.00</b>	<b>2,100.00</b>

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked  
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): *Fed EXP* Shipping Date  
*10/11/12*  
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

*ChmH*  
 PREPARER  
 (3/2005)

*10/15/12*  
 DATE PREPARED

12030902672