

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 INDIANA FARM BUREAU INC ELECT PAC INC

ADDRESS (number and street) P.O. Box 1290 Check if different than previously reported. (ACC) INDIANAPOLIS IN 46206

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE C C00169722 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 07 / 01 / 2014 through 09 / 30 / 2014

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 Elaine Rueff

Signature of Treasurer Elaine Rueff [Electronically Filed] Date 03 / 03 / 2015

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

INDIANA FARM BUREAU INC ELECT PAC 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="222529.44"/>	<input type="text" value="222529.44"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="194601.41"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="7243.26"/>	<input type="text" value="21589.66"/>
(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="201844.67"/>	<input type="text" value="244119.10"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="103935.02"/>	<input type="text" value="146209.45"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="97909.65"/>	<input type="text" value="97909.65"/>
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="0.00"/>	

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 FARM BUREAU INC ELECT PAC 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).....	0.00	0.00
(ii) Unitemized	7157.37	21305.65
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	7157.37	21305.65
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	7157.37	21305.65
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
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	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	85.89	284.01
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	7243.26	21589.66
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	7243.26	21589.66

DETAILED SUMMARY PAGE

of Disbursements

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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	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	20535.02	25559.45
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	20535.02	25559.45
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	25000.00	46000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
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	0.00
(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	0.00
29. Other Disbursements	58400.00	74650.00
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	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	103935.02	146209.45
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	103935.02	146209.45

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)	7157.37	21305.65
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7157.37	21305.65
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	20535.02	25559.45
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	20535.02	25559.45

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 OF 49
(check only one)
 11a 11b 11c 12
 13 14 15 16 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 FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial)
A. Farm Bureau Bank

Mailing Address 17300 Henderson Pass

City State Zip Code
Indianapolis IN 46202

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
284.01

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 15 / 2014
Transaction ID : SA17.5532

Amount of Each Receipt this Period
85.89

interest

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

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

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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	85.89
TOTAL This Period (last page this line number only).....▶	85.89

**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 FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial)

A. Aramark

Mailing Address 11834 Tapp Dr

City Indianapolis State IN Zip Code 46229

Purpose of Disbursement
meeting exp

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 30 / 2014

Transaction ID : SB21B.5961

Amount of Each Disbursement this Period

89.69

Full Name (Last, First, Middle Initial)

B. Aramark

Mailing Address 11834 Tapp Dr

City Indianapolis State IN Zip Code 46229

Purpose of Disbursement
meeting exp

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 06 / 2014

Transaction ID : SB21B.5962

Amount of Each Disbursement this Period

55.27

Full Name (Last, First, Middle Initial)

C. Wayne Belden

Mailing Address 5061 N. US 231

City Rensselaer State IN Zip Code 47978

Purpose of Disbursement
meeting supplies

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 08 / 2014

Transaction ID : SB21B.5958

Amount of Each Disbursement this Period

91.85

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

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

236.81

**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 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 FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial)

A. Wayne Belden

Mailing Address 5061 N. US 231

City Rensselaer State IN Zip Code 47978

Purpose of Disbursement
meeting supplies

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 17 / 2014

Transaction ID : SB21B.5959

Amount of Each Disbursement this Period

656.49

Full Name (Last, First, Middle Initial)

B. Glen Bode

Mailing Address 1011 Arthur Street

City Rochester State IN Zip Code 46975

Purpose of Disbursement
meeting supplies

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 24 / 2014

Transaction ID : SB21B.5945

Amount of Each Disbursement this Period

140.00

Full Name (Last, First, Middle Initial)

C. Rick Clark

Mailing Address 330 S Windmill Tr

City Greenwood State IN Zip Code 46142

Purpose of Disbursement
meeting supplies

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 16 / 2014

Transaction ID : SB21B.5951

Amount of Each Disbursement this Period

297.00

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

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

1093.49

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 FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial)

A. Decatur County Farm Bureau Inc

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		09		2014

Mailing Address 750 W Washington St.

Transaction ID : SB21B.5963

City Greensburg State IN Zip Code 47240

Amount of Each Disbursement this Period

177.37

Purpose of Disbursement meeting supplies

--

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Eastern Hancock FFA

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		02		2014

Mailing Address 103750 E 250 North

Transaction ID : SB21B.5965

City Charlottesville State IN Zip Code 46117

Amount of Each Disbursement this Period

250.00

Purpose of Disbursement meeting supplies

--

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Mel Egolf

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		24		2014

Mailing Address 0578 E US 33-57

Transaction ID : SB21B.5950

City Churubusco State IN Zip Code 46723

Amount of Each Disbursement this Period

175.00

Purpose of Disbursement per diem and mileage

--

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

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

602.37

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

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**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 FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial)

A. Seth Harden

Mailing Address 11686 E Atkins Rd

City Salem State IN Zip Code 47167

Purpose of Disbursement
meeting supplies

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 17 / 2014

Transaction ID : SB21B.5953

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

B. Margie Harmeyer

Mailing Address 11005 North 100 West

City Batesville State IN Zip Code 47006

Purpose of Disbursement
meeting supplies

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 06 / 2014

Transaction ID : SB21B.5949

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. Allison Hines

Mailing Address 4950 S 150 E

City Columbus State IN Zip Code 47201

Purpose of Disbursement
meeting supplies

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 17 / 2014

Transaction ID : SB21B.5940

Amount of Each Disbursement this Period

200.98

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

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

650.98

**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 FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial)

A. Homeplace Catering, LLC

Mailing Address 5117 North 300 East

City Greenfield State IN Zip Code 46140

Purpose of Disbursement
catering for meeting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 16 / 2014

Transaction ID : SB21B.5966

Amount of Each Disbursement this Period

8060.00

Full Name (Last, First, Middle Initial)

B. Husk, LLC

Mailing Address 7930 Prairie View Dr.

City Indianapolis State IN Zip Code 46256

Purpose of Disbursement
meeting supplies

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 16 / 2014

Transaction ID : SB21B.5967

Amount of Each Disbursement this Period

525.72

Full Name (Last, First, Middle Initial)

C. Indiana Agricultural Law Found

Mailing Address PO Box 1290

City Indianapolis State IN Zip Code 46206

Purpose of Disbursement
Donated per diem and mileage to IALF

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 24 / 2014

Transaction ID : SB21B.5968

Amount of Each Disbursement this Period

100.00

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

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

8685.72

**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 FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial)

A. Indiana Farm Bureau, Inc.

Mailing Address P.O. Box 1290

City Indianapolis State IN Zip Code 46206-1290

Purpose of Disbursement
entity filing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 06 / 2014

Transaction ID : SB21B.5969

Amount of Each Disbursement this Period

7.14

Full Name (Last, First, Middle Initial)

B. Indiana Farm Bureau, Inc.

Mailing Address P.O. Box 1290

City Indianapolis State IN Zip Code 46206-1290

Purpose of Disbursement
meeting supplies

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 22 / 2014

Transaction ID : SB21B.5970

Amount of Each Disbursement this Period

299.23

Full Name (Last, First, Middle Initial)

C. Indiana Farm Bureau, Inc.

Mailing Address P.O. Box 1290

City Indianapolis State IN Zip Code 46206-1290

Purpose of Disbursement
reimburse consulting fee/ supplies

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 16 / 2014

Transaction ID : SB21B.5971

Amount of Each Disbursement this Period

3352.75

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

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

3659.12

**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 FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial)

A. Indiana Farm Bureau, Inc.

Mailing Address P.O. Box 1290

City Indianapolis State IN Zip Code 46206-1290

Purpose of Disbursement
meeting supplies

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 17 / 2014

Transaction ID : SB21B.5972

Amount of Each Disbursement this Period

734.19

Full Name (Last, First, Middle Initial)

B. Indiana Farm Bureau, Inc.

Mailing Address P.O. Box 1290

City Indianapolis State IN Zip Code 46206-1290

Purpose of Disbursement
meeting supplies

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 26 / 2014

Transaction ID : SB21B.5973

Amount of Each Disbursement this Period

50.45

Full Name (Last, First, Middle Initial)

C. Rick Kelley

Mailing Address 98 Artist Drive

City Nashville State IN Zip Code 47448

Purpose of Disbursement
per diem and mileage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 24 / 2014

Transaction ID : SB21B.5952

Amount of Each Disbursement this Period

99.00

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

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

883.64

**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 FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial)

A. Markey's Audio Visual, Inc.

Mailing Address 2365 Enterprise Park Place

City Indianapolis State IN Zip Code 46218

Purpose of Disbursement
meeting supplies

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 16 / 2014

Transaction ID : SB21B.5974

Amount of Each Disbursement this Period

912.20

Full Name (Last, First, Middle Initial)

B. Tom Milligan

Mailing Address PO Box 1369

City Dana State IN Zip Code 47847-1369

Purpose of Disbursement
per diem and mileage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 24 / 2014

Transaction ID : SB21B.5957

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. Brad Ponsler

Mailing Address 3765 North 295 West

City North Vernon State IN Zip Code 47265

Purpose of Disbursement
meeting supplies

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 06 / 2014

Transaction ID : SB21B.5941

Amount of Each Disbursement this Period

214.00

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

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

1376.20

**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 FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial)

A. E.B. Rawles

Mailing Address 122 N Russell Street

City Sandborn State IN Zip Code 47578

Purpose of Disbursement
meeting supplies

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB21B.5944

Amount of Each Disbursement this Period

129.58

Category/
Type

Full Name (Last, First, Middle Initial)

B. Russell Sheep Company

Mailing Address 3500 E CR 700 North

City Eaton State IN Zip Code 47338-9231

Purpose of Disbursement
meeting supplies

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 16 / 2014

Transaction ID : SB21B.5976

Amount of Each Disbursement this Period

548.00

Category/
Type

Full Name (Last, First, Middle Initial)

C. Sease, Gerig & Associates

Mailing Address 101 W Ohio St
Suite 1800

City Indianapolis State IN Zip Code 46204-1987

Purpose of Disbursement
meeting entertainment

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 16 / 2014

Transaction ID : SB21B.5977

Amount of Each Disbursement this Period

1200.00

Category/
Type

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

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

1877.58

**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 FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial)

A. The Promotion Lab

Mailing Address PO Box 706

City State Zip Code
New Castle IN 47362

Purpose of Disbursement
meeting supplies

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	/	11	/	2014

Transaction ID : SB21B.5978

Amount of Each Disbursement this Period

609.40

Full Name (Last, First, Middle Initial)

B. Lana Wallpe

Mailing Address 1638 W 200 S

City State Zip Code
Fowler IN 47944

Purpose of Disbursement
per diem and mileage

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
07	/	24	/	2014

Transaction ID : SB21B.5948

Amount of Each Disbursement this Period

225.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

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
	/		/	

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)..... ▶

834.40

19900.31

**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 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

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NAME OF COMMITTEE (In Full)
INDIANA FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial)

A. BOEHNER FOR SPEAKER

Mailing Address 320 FIRST ST., SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement contribution

Candidate Name
BOEHNER FOR SPEAKER

Office Sought: House Senate President
State: OH District: 08
Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Transaction ID : **SB23.5843**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. BUCSHON FOR CONGRESS

Mailing Address PO BOX 250

City NEWBURGH State IN Zip Code 47629

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: IN District: 08
Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	5		2	0	1	4

Transaction ID : **SB23.5844**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Dan Coats for Indiana

Mailing Address 303 N Alabama St.
Suite 390

City Indianapolis State IN Zip Code 46204

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: IN District: 00
Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	1	4

Transaction ID : **SB23.5845**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

7	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

7	0	0	0	0	0	0	0	0	0
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**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 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

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NAME OF COMMITTEE (In Full)
INDIANA FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF SUSAN BROOKS

Mailing Address 9425 N Meridian Street
Suite 237

City INDIANAPOLIS State IN Zip Code 46260

Purpose of Disbursement
contribution

Candidate Name

Office Sought: House
 Senate
 President
State: IN District: 05

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	27	/	2014

Transaction ID : SB23.5846

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF TODD YOUNG

Mailing Address POST OFFICE BOX 1053

City BLOOMINGTON State IN Zip Code 47402

Purpose of Disbursement
contribution

Candidate Name

Office Sought: House
 Senate
 President
State: IN District: 09

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	25	/	2014

Transaction ID : SB23.5847

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. HOOSIERS FOR ROKITA

Mailing Address 7643 East U.S. 36

City Avon State IN Zip Code 46123

Purpose of Disbursement
contribution

Candidate Name

Office Sought: House
 Senate
 President
State: IN District: 04

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	25	/	2014

Transaction ID : SB23.5848

Amount of Each Disbursement this Period

5000.00

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

7000.00

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

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**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 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

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NAME OF COMMITTEE (In Full)
INDIANA FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial)

A. Luke Messer for Congress

Mailing Address P.O. BOX 917

City State Zip Code
SHELBYVILLE IN 46176

Purpose of Disbursement
contribution

Candidate Name

Office Sought: House
 Senate
 President
State: IN District: 06

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	25	/	2014

Transaction ID : SB23.5849

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. VISCLOSKY FOR CONGRESS

Mailing Address P.O. Box 10003

City State Zip Code
Merrillville IN 46411

Purpose of Disbursement
contribution

Candidate Name

Office Sought: House
 Senate
 President
State: IN District: 01

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	25	/	2014

Transaction ID : SB23.5850

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Walorski for Congress

Mailing Address PO box 954

City State Zip Code
Mishawaka IN 46546-0954

Purpose of Disbursement
contribution

Candidate Name

Office Sought: House
 Senate
 President
State: IN District: 02

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	25	/	2014

Transaction ID : SB23.5851

Amount of Each Disbursement this Period

5000.00

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

11000.00

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

25000.00

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial)

A. Bill Friend for State Rep.

Mailing Address 3127 W. 1500 North

City State Zip Code
Macy IN 46951

Purpose of Disbursement
contribution

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
07 / 25 / 2014

Transaction ID : SB29.5852

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Bob Heaton for State Rep. Comm

Mailing Address PO Box 9629

City State Zip Code
Terre Haute IN 47808

Purpose of Disbursement
contribution

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
07 / 25 / 2014

Transaction ID : SB29.5853

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

C. Carlin Yoder Committee

Mailing Address PO Box 2182

City State Zip Code
Indianapolis IN 46206

Purpose of Disbursement
contribution

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
08 / 27 / 2014

Transaction ID : SB29.5854

Amount of Each Disbursement this Period

500.00

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

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

1800.00

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial)

A. Charbonneau for Senate

Mailing Address P.O. Box 30

City Valparaiso State IN Zip Code 46384

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 27 / 2014

Transaction ID : SB29.5855

Amount of Each Disbursement this Period

1000.00

B. Cindy for State House Comm.

Full Name (Last, First, Middle Initial)

Mailing Address 1208 Timbrook Lane

City Beech Grove State IN Zip Code 46107

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB29.5856

Amount of Each Disbursement this Period

500.00

C. Cit. Mara Candelarie Reardon

Full Name (Last, First, Middle Initial)

Mailing Address 1336 Fran-Lin Parkway

City Munster State IN Zip Code 46321

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB29.5857

Amount of Each Disbursement this Period

300.00

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

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

1800.00

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial)

A. Citizens for Buck

Mailing Address 4407 McKibben Drive

City Kokomo State IN Zip Code 46902

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB29.5858

Amount of Each Disbursement this Period

500.00

Category/Type

Full Name (Last, First, Middle Initial)

B. Citizens for Buck

Mailing Address 4407 McKibben Drive

City Kokomo State IN Zip Code 46902

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 27 / 2014

Transaction ID : SB29.5859

Amount of Each Disbursement this Period

500.00

Category/Type

Full Name (Last, First, Middle Initial)

C. Citizens for Jeff Thompson

Mailing Address 6001 North State Rd. 39

City Lizton State IN Zip Code 46149

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB29.5860

Amount of Each Disbursement this Period

500.00

Category/Type

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

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

1500.00

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial)

A. Citizens for Kruse

Mailing Address 6704 County Road 31

City Auburn State IN Zip Code 46706

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB29.5861

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Citizens for Merritt

Mailing Address 4134 N. Illinois

City Indianapolis State IN Zip Code 46208

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB29.5862

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Citizens for Tim Brown

Mailing Address PO Box 861

City Crawfordsville State IN Zip Code 47933

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB29.5863

Amount of Each Disbursement this Period

1500.00

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

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

3000.00

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial)

A. Citizens for Tim Brown

Mailing Address PO Box 861

City State Zip Code
Crawfordsville IN 47933

Purpose of Disbursement
contribution

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
08	/	27	/	2014

Transaction ID : SB29.5864

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Citizens for Wolkins Committee

Mailing Address PO Box 891

City State Zip Code
Warsaw IN 46581

Purpose of Disbursement
contribution

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
07	/	25	/	2014

Transaction ID : SB29.5865

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Comm. to Elect Cherrish Pryor

Mailing Address 4667 Falcon Run Way

City State Zip Code
Indianapolis IN 46254

Purpose of Disbursement
contribution

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
07	/	25	/	2014

Transaction ID : SB29.5871

Amount of Each Disbursement this Period

500.00

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

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

2000.00

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**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial)

A. Comm. to Elect Jim Baird

Mailing Address 2718 N 550 West

City Greencastle State IN Zip Code 46135

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB29.5872

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Comm. to Elect Matt Ubelhor

Mailing Address 2245 W 150 South

City Bloomfield State IN Zip Code 47424

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB29.5873

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Comm. to Elect Randy Head

Mailing Address 5003 Waterbury Ct.

City Logansport State IN Zip Code 46947

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 27 / 2014

Transaction ID : SB29.5874

Amount of Each Disbursement this Period

500.00

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

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

2000.00

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial)

A. Comm. to Elect Rick Niemeyer

Mailing Address 13304 W. 181st Street

City Lowell State IN Zip Code 46356

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB29.5875

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Comm. to Elect Sean Eberhart

Mailing Address 2744 E. Michigan Rd.

City Shelbyville State IN Zip Code 46176

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB29.5876

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Comm. to Elect Terri Austin

Mailing Address 1030 W. Riverview Drive

City Anderson State IN Zip Code 46011

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB29.5877

Amount of Each Disbursement this Period

500.00

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

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

2000.00

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial)

A. Comm. to Elect Tim Lanane

Mailing Address 34 West 8th Street

City Anderson State IN Zip Code 46016

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 27 / 2014

Transaction ID : SB29.5878

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Comm. to Elect Tom Dermody

Mailing Address 615 W. Maple Lane

City La Porte State IN Zip Code 46350

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB29.5879

Amount of Each Disbursement this Period

750.00

Full Name (Last, First, Middle Initial)

C. Committee to Elect Ben Smaltz

Mailing Address 302 Hunters Ridge

City Auburn State IN Zip Code 46706

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB29.5880

Amount of Each Disbursement this Period

500.00

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

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

2250.00

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial) A. Committee to Elect Bob Cherry		Date of Disbursement MM / DD / YYYY 07 / 25 / 2014	
Mailing Address 3118 E 100 S		Transaction ID : SB29.5881	
City Greenfield State IN Zip Code 46140	Purpose of Disbursement contribution	Amount of Each Disbursement this Period 1500.00	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Full Name (Last, First, Middle Initial) B. Committee to Elect Brian Bosma		Date of Disbursement MM / DD / YYYY 07 / 25 / 2014	
Mailing Address P.O. Box 44054		Transaction ID : SB29.5882	
City Indianapolis State IN Zip Code 46244	Purpose of Disbursement contribution	Amount of Each Disbursement this Period 2000.00	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Full Name (Last, First, Middle Initial) C. Committee to Elect Denny Zent		Date of Disbursement MM / DD / YYYY 07 / 25 / 2014	
Mailing Address 3030 N. Bay View Road		Transaction ID : SB29.5883	
City Angola State IN Zip Code 46703	Purpose of Disbursement contribution	Amount of Each Disbursement this Period 300.00	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
SUBTOTAL of Disbursements This Page (optional)..... ▶		3800.00	
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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial) A. Committee to Elect Hal Slager		Date of Disbursement MM / DD / YYYY 07 / 25 / 2014
Mailing Address 1020 Woodhollow Drive		Transaction ID : SB29.5884
City Scherville	State IN	
Purpose of Disbursement contribution	Candidate Name	Amount of Each Disbursement this Period 300.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) B. Committee to Elect Jim Tomes		Date of Disbursement MM / DD / YYYY 07 / 25 / 2014
Mailing Address 9412 Hwy 66		Transaction ID : SB29.5885
City Wadesville	State IN	
Purpose of Disbursement contribution	Candidate Name	Amount of Each Disbursement this Period 500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) C. Comm to Elect Heath VanNatter		Date of Disbursement MM / DD / YYYY 07 / 25 / 2014
Mailing Address 11820 Crestview Blvd.		Transaction ID : SB29.5866
City Kokomo	State IN	
Purpose of Disbursement contribution	Candidate Name	Amount of Each Disbursement this Period 300.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/ Type	

SUBTOTAL of Disbursements This Page (optional).....▶	1100.00
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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial)

A. Comm to Elect Kevin Mahan for State Representative

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		27		2014

Mailing Address 305 E. Fairlane Dr

Transaction ID : SB29.5867

City Hartford City State IN Zip Code 47348

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement contribution

--

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Comm to Elect Kevin Mahan State Representative

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		25		2014

Mailing Address 305 E. Fairlane Dr

Transaction ID : SB29.5868

City Hartford City State IN Zip Code 47348

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement contribution

--

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Comm to Elt Michael Aylesworth

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		25		2014

Mailing Address PO Bos 451

Transaction ID : SB29.5869

City Hebron State IN Zip Code 46341

Amount of Each Disbursement this Period

300.00

Purpose of Disbursement contribution

--

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

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

1300.00

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

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**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial)

A. Comm to Re-Elect Richard Young

Mailing Address 10347 E. Daugherty Lane

City Milltown State IN Zip Code 47145

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB29.5870

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. David Long for State Senate

Mailing Address 7100 W. Jefferson Blvd.

City Fort Wayne State IN Zip Code 46863

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 27 / 2014

Transaction ID : SB29.5886

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Ed Clere for State Repres.

Mailing Address 1701 DePauw Avenue

City New Albany State IN Zip Code 47150

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB29.5887

Amount of Each Disbursement this Period

500.00

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

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

3500.00

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial)

A. Elect Luke Kenley

Mailing Address P.O. Box 809

City Noblesville State IN Zip Code 46061

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 27 / 2014

Transaction ID : SB29.5888

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Elect Milo Smith State Rep.

Mailing Address 632 3rd Street

City Columbus State IN Zip Code 47201

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB29.5889

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Elect Negele for State Rep.

Mailing Address 401 E. Pike St.

City Attica State IN Zip Code 47918

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB29.5890

Amount of Each Disbursement this Period

500.00

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

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

2000.00

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial)

A. Eric Koch for State Rep.

Mailing Address P.O. Box 372

City Bedford State IN Zip Code 47421

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB29.5891

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Friends of David Ober

Mailing Address 1886 E. 500 N.

City Albion State IN Zip Code 46701

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB29.5892

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Friends of Don Lehe

Mailing Address 10644 S. 100 East

City Brookston State IN Zip Code 47923

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB29.5893

Amount of Each Disbursement this Period

1000.00

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

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

2500.00

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial)

A. Friends of Doug Eckerty

Mailing Address PO Box 55

City Yorktown State IN Zip Code 47396

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB29.5894

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Friends of Douglas Gutwein

Mailing Address P.O. Box 341

City Francesville State IN Zip Code 47946

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB29.5895

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Friends of Ed Soliday Comm.

Mailing Address 1904 William Drive

City Valparaiso State IN Zip Code 46384

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB29.5896

Amount of Each Disbursement this Period

1000.00

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

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

2000.00

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial)

A. Friends of Jim Lucas

Mailing Address 1114 E 4th St

City Seymour State IN Zip Code 47274

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

Transaction ID : SB29.5897

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Friends of Jim Smith

Mailing Address 8603 Falcon Road

City Charlestown State IN Zip Code 47111

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

Transaction ID : SB29.5898

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Friends of Liz Brown

Mailing Address 5701 Reed Rd.

City Fort Wayne State IN Zip Code 46835

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

Transaction ID : SB29.5899

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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial)

A. Friends of Randy Frye

Mailing Address 4704 S. US 421

City Greensburg State IN Zip Code 47240

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB29.5900

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Friends of Rhonda J. Rhoads

Mailing Address 525 N. Capitol Ave NE

City Corydon State IN Zip Code 47112

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB29.5901

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Friends of Richard Hamm

Mailing Address 2266 Walnut Lane

City Richmond State IN Zip Code 47374

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB29.5902

Amount of Each Disbursement this Period

300.00

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

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

1300.00

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial)

A. Friends of Ron Bacon

Mailing Address 10300 Meadowlark Hill Rd

City Chandler State IN Zip Code 47610

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB29.5903

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Friends of Truitt for State Representative

Mailing Address PO Box 3070

City West Lafayette State IN Zip Code 47996

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB29.5904

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Goodin for State Rep. Comm.

Mailing Address P.O. Box 37

City Crothersville State IN Zip Code 47229

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB29.5905

Amount of Each Disbursement this Period

750.00

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

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

1750.00

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial)

A. Goodin for State Rep. Comm.

Mailing Address P.O. Box 37

City State Zip Code
Crothersville IN 47229

Purpose of Disbursement
contribution

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
08 / 27 / 2014

Transaction ID : SB29.5906

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. Greg Beumer for State Rep Comm

Mailing Address 7160 South Huntsville Rd

City State Zip Code
Modoc IN 47358

Purpose of Disbursement
contribution

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
08 / 27 / 2014

Transaction ID : SB29.5907

Amount of Each Disbursement this Period

750.00

Full Name (Last, First, Middle Initial)

C. Greg Porter for St Rep Dist 96

Mailing Address 3614 N. Pennsylvania

City State Zip Code
Indianapolis IN 46205

Purpose of Disbursement
contribution

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
07 / 25 / 2014

Transaction ID : SB29.5908

Amount of Each Disbursement this Period

500.00

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

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

1500.00

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial)

A. Grooms for State Senate

Mailing Address 3104 Autumn Green Way

City Jeffersonville State IN Zip Code 47130-7548

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB29.5909

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

B. Harman for State Rep Committee

Mailing Address 209 N Main St.

City Bourbon State IN Zip Code 46504

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB29.5910

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

C. Hoosiers for Holdman

Mailing Address 7617 West Jefferson Blvd

City Fort Wayne State IN Zip Code 46804

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB29.5911

Amount of Each Disbursement this Period

500.00

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

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

1100.00

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial)

A. Hoosiers for Scott Pelath

Mailing Address 1824 Manhattan St

City Michigan City State IN Zip Code 46360

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 25 / 2014

Transaction ID : SB29.5912

Amount of Each Disbursement this Period

1000.00

Category/
Type

Full Name (Last, First, Middle Initial)

B. House Republican Campaign Comm

Mailing Address PO Box 44054

City Indianapolis State IN Zip Code 46204

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 08 / 2014

Transaction ID : SB29.5913

Amount of Each Disbursement this Period

2000.00

Category/
Type

Full Name (Last, First, Middle Initial)

C. House Republican Campaign Comm

Mailing Address PO Box 44054

City Indianapolis State IN Zip Code 46204

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 27 / 2014

Transaction ID : SB29.5914

Amount of Each Disbursement this Period

2000.00

Category/
Type

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

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

5000.00

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial) A. Indiana Senate Democrat Comm		Date of Disbursement MM / DD / YYYY 09 / 02 / 2014
Mailing Address 115 W. Washington St. Ste 1165 S		Transaction ID : SB29.5915
City Indianapolis	State IN Zip Code 46204	
Purpose of Disbursement contribution	Candidate Name	Amount of Each Disbursement this Period 1000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Jean Leising for State Senate		Date of Disbursement MM / DD / YYYY 08 / 27 / 2014
Mailing Address 5268 Stockpile Road		Transaction ID : SB29.5916
City Oldenburg	State IN Zip Code 47036	
Purpose of Disbursement contribution	Candidate Name	Amount of Each Disbursement this Period 1000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Johnston for State Rep		Date of Disbursement MM / DD / YYYY 07 / 25 / 2014
Mailing Address 860 N 100 W		Transaction ID : SB29.5917
City Valparaiso	State IN Zip Code 46385	
Purpose of Disbursement contribution	Candidate Name	Amount of Each Disbursement this Period 500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....▶	2500.00
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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial)

A. Markmessmer.com

Mailing Address 795 E. Scherle Lane

City Jasper State IN Zip Code 47546

Purpose of Disbursement
contribution

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
07	/	25	/	2014

Transaction ID : SB29.5918

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Matt Lehman for State Rep.

Mailing Address 663 Lehman

City Berne State IN Zip Code 46711

Purpose of Disbursement
contribution

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
09	/	18	/	2014

Transaction ID : SB29.5919

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

C. Mike Braun for State Rep.

Mailing Address 505 Main St

City Jasper State IN Zip Code 47546

Purpose of Disbursement
contribution

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
07	/	25	/	2014

Transaction ID : SB29.5920

Amount of Each Disbursement this Period

500.00

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

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

1300.00

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**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial)

A. Mishler for State Senate

Mailing Address PO Box 2182

City Indianapolis State IN Zip Code 46206

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 27 / 2014

Transaction ID : SB29.5921

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Niezgodski for State Repres.

Mailing Address PO Box 3096

City South Bend State IN Zip Code 46619

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB29.5922

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Our Community for Casey Cox

Mailing Address 2129 Dodge Avenue

City Fort Wayne State IN Zip Code 46805

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB29.5923

Amount of Each Disbursement this Period

500.00

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

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

1500.00

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial) A. Phil Boots for State Senate District 23 Committee		Date of Disbursement MM / DD / YYYY 07 / 25 / 2014
Mailing Address 5061 South Sherwood Cove		Transaction ID : SB29.5924
City Crawfordsville	State IN	
Zip Code 47933	Purpose of Disbursement contribution	Amount of Each Disbursement this Period 500.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Raatz for IN State Senate Comm		Date of Disbursement MM / DD / YYYY 07 / 25 / 2014
Mailing Address PO Box 372		Transaction ID : SB29.5925
City Centerville	State IN	
Zip Code 47330	Purpose of Disbursement contribution	Amount of Each Disbursement this Period 500.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Riecken for State Rep.		Date of Disbursement MM / DD / YYYY 07 / 25 / 2014
Mailing Address 5935 Knight Drive		Transaction ID : SB29.5926
City Evansville	State IN	
Zip Code 47715	Purpose of Disbursement contribution	Amount of Each Disbursement this Period 500.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	1500.00
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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial)

A. Ron Alting for State Senate

Mailing Address P.O. Box 186

City Lafayette State IN Zip Code 47902

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : **SB29.5927**

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

B. Steuerwald for State Rep.

Mailing Address P.O. Box 503

City Danville State IN Zip Code 46122

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : **SB29.5928**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Steven R Stemler Election Comm

Mailing Address 1001 Penn Street

City Jeffersonville State IN Zip Code 47130

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : **SB29.5929**

Amount of Each Disbursement this Period

500.00

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

1800.00

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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial)

A. Sue Glick for Senate

Mailing Address 113 W Spring Street

City Lagrange State IN Zip Code 46761

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	27	/	2014

Transaction ID : SB29.5930

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Taxpayers for Greg Walker

Mailing Address 3129 25th St., Unit 342

City Columbus State IN Zip Code 47203

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	25	/	2014

Transaction ID : SB29.5931

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. The Mayfield Campaign

Mailing Address 50 S. Madison St.

City Mooresville State IN Zip Code 46158

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	25	/	2014

Transaction ID : SB29.5932

Amount of Each Disbursement this Period

500.00

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

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

1500.00

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**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial)

A. Turner for State Rep.

Mailing Address 70 Forest Hollow

City Cicero State IN Zip Code 46034

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB29.5933

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Vote Chip Perfect

Mailing Address 19074 Perfect Place Lane

City Lawrenceburg State IN Zip Code 47025

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB29.5934

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. Washburne for State Rep.

Mailing Address PO Box 127

City Inglefield State IN Zip Code 47618

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB29.5935

Amount of Each Disbursement this Period

500.00

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

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

1750.00

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial)

A. Wendy McNamara for State Rep.

Mailing Address 8971 Waltz Rd.

City Mount Vernon State IN Zip Code 47620

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB29.5936

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Wesco Victory Committee

Mailing Address 59771 Red Bird Court

City Mishawaka State IN Zip Code 46544

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB29.5937

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Woody Burton for State Rep

Mailing Address 69 Meadow Lane

City Whiteland State IN Zip Code 46184

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB29.5938

Amount of Each Disbursement this Period

300.00

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

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

1300.00

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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INDIANA FARM BUREAU INC ELECT PAC INC

Full Name (Last, First, Middle Initial)

A. www.SteveDavisson.com

Mailing Address PO Box 341

City Salem State IN Zip Code 47167

Purpose of Disbursement
contribution

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
07	/	25	/	2014

Transaction ID : SB29.5939

Amount of Each Disbursement this Period

750.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

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
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Amount of Each Disbursement this Period

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Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

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
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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)..... ▶

750.00

58400.00
