

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Indiana Senate 2012

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="2012"/>		<input type="text" value="62.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="61.58"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="240.00"/>	<input type="text" value="490.00"/>
(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="301.58"/>	<input type="text" value="552.00"/>
7. Total Disbursements (from Line 31)	<input type="text" value="175.00"/>	<input type="text" value="425.42"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<input type="text" value="126.58"/>	<input type="text" value="126.58"/>
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

12020784674

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Indiana Senate 2012

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.....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	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 Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	0.00	0.00
12. Transfers From Affiliated/Other Party Committees.....	240.00	490.00
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.).....	0.00	0.00
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)).....▶	240.00	490.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	240.00	490.00

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DETAILED SUMMARY PAGE
of Disbursements

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	175.00	425.42
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	175.00	425.42
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E).....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	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	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	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))..	175.00	425.42
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	175.00	425.42

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DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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)	0.00	0.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	175.00	425.42
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	175.00	425.42

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**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 8

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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 Senate 2012

A. DSCC

Full Name (Last, First, Middle Initial)
Mailing Address 120 Maryland Ave NE

City Washington State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C** 00042366

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
391.50

Date of Receipt

MM / DD / YYYY
08 / 10 / 2012

Transaction ID : SA12-17

Amount of Each Receipt this Period

240.00

Advance for Joint Fundraising Activity

B.

Full Name (Last, First, Middle Initial)
Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

C.

Full Name (Last, First, Middle Initial)
Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

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

240.00

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

240.00

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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 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 Senate 2012

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address P.O. Box 27025

City Richmond State VA Zip Code 23261

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 02 / 2012

Transaction ID : SB21B-15

Amount of Each Disbursement this Period

25.00

B. Bank of America

Mailing Address P.O. Box 27025

City Richmond State VA Zip Code 23261

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 01 / 2012

Transaction ID : SB21B-16

Amount of Each Disbursement this Period

25.00

C. Bank of America

Mailing Address P.O. Box 27025

City Richmond State VA Zip Code 23261

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 04 / 2012

Transaction ID : SB21B-22

Amount of Each Disbursement this Period

25.00

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

75.00

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)		PAGE 8 OF 8								
	<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

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NAME OF COMMITTEE (In Full)
Indiana Senate 2012

Full Name (Last, First, Middle Initial)		Date of Disbursement							
A. DSCC		<table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>09</td> <td>30</td> <td>2012</td> </tr> </table>		M M M	D D D	Y Y Y Y Y Y	09	30	2012
M M M	D D D	Y Y Y Y Y Y							
09	30	2012							
Mailing Address 120 Maryland Ave NE		Transaction ID : SB21B-21							
City	State	Zip Code	Amount of Each Disbursement this Period						
Washington	DC	20002							
Purpose of Disbursement Administrative/Legal Services		Category/ Type	<table border="1"> <tr> <td>100.00</td> </tr> </table>	100.00					
100.00									
Candidate Name									
Office Sought:	House	Disbursement For:							
	Senate	<input type="checkbox"/> Primary <input type="checkbox"/> General							
	President	<input type="checkbox"/> Other (specify) ▼							
State:	District:								

Full Name (Last, First, Middle Initial)		Date of Disbursement							
B.		<table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </table>		M M M	D D D	Y Y Y Y Y Y			
M M M	D D D	Y Y Y Y Y Y							
Mailing Address		Transaction ID :							
City	State	Zip Code	Amount of Each Disbursement this Period						
Purpose of Disbursement		Category/ Type	<table border="1"> <tr> <td></td> </tr> </table>						
Candidate Name									
Office Sought:	House	Disbursement For:							
	Senate	<input type="checkbox"/> Primary <input type="checkbox"/> General							
	President	<input type="checkbox"/> Other (specify) ▼							
State:	District:								

Full Name (Last, First, Middle Initial)		Date of Disbursement							
C.		<table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </table>		M M M	D D D	Y Y Y Y Y Y			
M M M	D D D	Y Y Y Y Y Y							
Mailing Address		Transaction ID :							
City	State	Zip Code	Amount of Each Disbursement this Period						
Purpose of Disbursement		Category/ Type	<table border="1"> <tr> <td></td> </tr> </table>						
Candidate Name									
Office Sought:	House	Disbursement For:							
	Senate	<input type="checkbox"/> Primary <input type="checkbox"/> General							
	President	<input type="checkbox"/> Other (specify) ▼							
State:	District:								

SUBTOTAL of Disbursements This Page (optional).....▶	<table border="1"> <tr> <td>100.00</td> </tr> </table>	100.00
100.00		
TOTAL This Period (last page this line number only).....▶	<table border="1"> <tr> <td>175.00</td> </tr> </table>	175.00
175.00		

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United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED 10-15-12
Date of Receipt

USPS FIRST CLASS MAIL _____
Postmark

USPS REGISTERED/CERTIFIED _____
Postmark

USPS PRIORITY MAIL _____
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

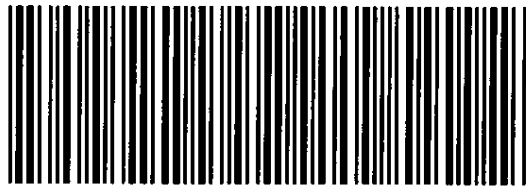
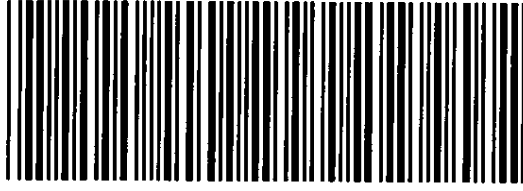
POSTMARK ILLEGIBLE NO POSTMARK

FAX _____
Date of Receipt

OTHER _____
Date of Receipt or Postmark

PREPARER RD DATE PREPARED 10-15-12

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