

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Carlos May 2012

ADDRESS (number and street)

515 Lynton Way

Check if different than previously reported. (ACC)

Westfield

IN

46074

2. FEC IDENTIFICATION NUMBER ▼

C C00513119

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

IN

07

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

(c) 30-Day **POST**-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y  
04 / 19 / 2012

through

M M / D D / Y Y Y Y  
06 / 30 / 2012

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

Type or Print Name of Treasurer Benjamin Roeger

Signature of Treasurer Benjamin Roeger

[Electronically Filed]

Date

M M / D D / Y Y Y Y  
09 / 11 / 2012

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

Office Use Only

FEC FORM 3  
(Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Carlos May 2012**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	12060.00	31575.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	12060.00	31575.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	12078.64	26816.04
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	12078.64	26816.04
8. Cash on Hand at Close of Reporting Period (from Line 27).....	4558.96	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Carlos May 2012**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	8760.00	25070.00
(ii) Unitemized.....	1050.00	4255.00
(iii) TOTAL of contributions from individuals ▶	9810.00	29325.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	2250.00	2250.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	12060.00	31575.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	12060.00	31575.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	12078.64	26816.04
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. 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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	200.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	12078.64	27016.04

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	4577.60
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	12060.00
25. SUBTOTAL (add Line 23 and Line 24).....	16637.60
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	12078.64
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	4558.96

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 18
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)  
**Carlos May 2012**

**A.** Full Name (Last, First, Middle Initial)  
**Jim Ammeen**

Mailing Address 3116 North Pennsylvania

City Indianapolis State IN Zip Code 46205

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

Name of Employer Ammeen and Associates Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 04 / 2012

**Transaction ID : SA11AI.4286**

Amount of Each Receipt this Period  
 contribution 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Balaraju Chinthala**

Mailing Address 5391 Rockstone Ct

City Indianapolis State IN Zip Code 46268

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

Name of Employer Indiana Fitness Works Occupation Director of Rehab Services

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 29 / 2012

**Transaction ID : SA11AI.4274**

Amount of Each Receipt this Period  
 contribution 2500.00

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

Mailing Address 10455 Woods Edge

City Fishers State IN Zip Code 46037

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

Name of Employer The Estell Group, LLC Occupation Principal

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 03 / 2012

**Transaction ID : SA11AI.4287**

Amount of Each Receipt this Period  
 contribution 500.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 18
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Carlos May 2012**

Full Name (Last, First, Middle Initial) <b>A. Thomas Geisse</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 02 / 2012	
Mailing Address 5303 Green Braes East		<b>Transaction ID : SA11AI.4305</b>	
City Indianapolis	State IN	Zip Code 46234	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period contribution	
Name of Employer Geisse Marketing, LLC		Occupation President	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date contribution	
		500.00	

Full Name (Last, First, Middle Initial) <b>B. Thomas Geisse</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 11 / 2012	
Mailing Address 5303 Green Braes East		<b>Transaction ID : SA11AI.4279</b>	
City Indianapolis	State IN	Zip Code 46234	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period contribution	
Name of Employer Geisse Marketing, LLC		Occupation President	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date contribution	
		500.00	
		1000.00	

Full Name (Last, First, Middle Initial) <b>C. Jane Howard</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 23 / 2012	
Mailing Address 678 Borean Rd		<b>Transaction ID : SA11AI.4284</b>	
City Martinsville	State IN	Zip Code 46151	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period contribution	
Name of Employer Retired		Occupation Cardiologist	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date contribution	
		500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<b>TOTAL</b> This Period (last page this line number only).....	contribution

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 18
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Carlos May 2012**

**A.** Full Name (Last, First, Middle Initial)  
**Eric Johnson**

Mailing Address 837 S Park Trail

City Carmel State IN Zip Code 46032

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 18 / 2012

**Transaction ID : SA11AI.4262**

Amount of Each Receipt this Period  
 500.00  
 contribution

**B.** Full Name (Last, First, Middle Initial)  
**Lewis Lee**

Mailing Address 830 E Higgins Rd

City Schaumburg State IL Zip Code 60173

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

Name of Employer Transmax Logistics Occupation Managing Director

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2012

**Transaction ID : SA11AI.4298**

Amount of Each Receipt this Period  
 500.00  
 contribution

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

Mailing Address 8243 South Rising Sun

City Pendleton State IN Zip Code 46064

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

Name of Employer Romano's Macaroni Grill Occupation Restaurant Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 24 / 2012

**Transaction ID : SA11AI.4294**

Amount of Each Receipt this Period  
 500.00  
 contribution

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 18
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Carlos May 2012**

**A.** Full Name (Last, First, Middle Initial)  
**P.E. Macallister**

Mailing Address **PO Box 11941**

City **Indianapolis** State **IN** Zip Code **46206**

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

Name of Employer **Macallister Machinery** Occupation **Owner**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 27 / 2012**

**Transaction ID : SA11AI.4272**

Amount of Each Receipt this Period  
**1000.00**  
 contribution

**B.** Full Name (Last, First, Middle Initial)  
**Remo Mezzetta**

Mailing Address **7250 Lakeside Woods Dr**

City **Indianapolis** State **IN** Zip Code **46270**

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

Name of Employer **Mezzetta Construction Services** Occupation **VP of Operations**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 09 / 2012**

**Transaction ID : SA11AI.4291**

Amount of Each Receipt this Period  
**100.00**  
 contribution

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

Mailing Address **515 Lynton Way**

City **Westfield** State **IN** Zip Code **46074**

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

Name of Employer **CL Coonrod** Occupation **Accountant**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**625.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 30 / 2012**

**Transaction ID : SA11AI.4340**

Amount of Each Receipt this Period  
**200.00**  
 In-kind - work on accounting for campaign transactions, FEC reporting matters

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

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

**1300.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 18
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Carlos May 2012**

**A.** Full Name (Last, First, Middle Initial)  
**Benjamin Roeger**

Mailing Address 515 Lynton Way

City: Westfield State: IN Zip Code: 46074

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

Name of Employer: CL Coonrod Occupation: Accountant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 685.00

Date of Receipt: 05 / 14 / 2012

**Transaction ID : SA11AI.4333**

Amount of Each Receipt this Period: 60.00

contributorin

**B.** Full Name (Last, First, Middle Initial)  
**Benjamin Roeger**

Mailing Address 515 Lynton Way

City: Westfield State: IN Zip Code: 46074

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

Name of Employer: CL Coonrod Occupation: Accountant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 885.00

Date of Receipt: 05 / 31 / 2012

**Transaction ID : SA11AI.4336**

Amount of Each Receipt this Period: 200.00

In-kind - account for campaign transactions, work on FEC reporting matters

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

Mailing Address 515 Lynton Way

City: Westfield State: IN Zip Code: 46074

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

Name of Employer: CL Coonrod Occupation: Accountant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1085.00

Date of Receipt: 06 / 30 / 2012

**Transaction ID : SA11AI.4338**

Amount of Each Receipt this Period: 200.00

In-kind - work on accounting for campaign transactions, FEC reporting matters

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

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

460.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 18
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Carlos May 2012**

Full Name (Last, First, Middle Initial) <b>Glenn Wright</b>		Date of Receipt M M / D D / Y Y Y Y Y Y <b>04 / 25 / 2012</b>
Mailing Address 1557 Brewster Rd		<b>Transaction ID : SA11Al.4258</b>
City Indianapolis	State IN	
Zip Code 46260		Amount of Each Receipt this Period contribution 500.00
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation None	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	500.00
<b>TOTAL</b> This Period (last page this line number only).....	8760.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 18
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Carlos May 2012**

**A.** Full Name (Last, First, Middle Initial)  
**Committee to Elect Brian Bosma**

Mailing Address 9062 Nautical Watch

City Indianapolis State IN Zip Code 46236

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 11 / 2012

**Transaction ID : SA11C.4277**

Amount of Each Receipt this Period  
 contribution 250.00

**B.** Full Name (Last, First, Middle Initial)  
**HOOSIERS FOR ROKITA, INC.**

Mailing Address 7643 EAST U.S. 36

City AVON State IN Zip Code 46123

FEC ID number of contributing federal political committee. **C** C00476192

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 21 / 2012

**Transaction ID : SA11C.4281**

Amount of Each Receipt this Period  
 contribution 1000.00

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

Mailing Address PO Box 441641

City Indianapolis State IN Zip Code 46244

FEC ID number of contributing federal political committee. **C** C00486852

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 01 / 2012

**Transaction ID : SA11C.4248**

Amount of Each Receipt this Period  
 contribution 1000.00

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

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

2250.00

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 18	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Carlos May 2012**

Full Name (Last, First, Middle Initial) <b>A. Ashley Davis</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2012
Mailing Address 47 West County Line Rd		Amount of Each Disbursement this Period 600.00 <b>Transaction ID : SB17.4308</b>
City Indianapolis	State IN Zip Code 46217	
Purpose of Disbursement Commission paid to Campaign Finance Director to generate and track contributions		Category/Type 003
Candidate Name <b>Carlos May 2012</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IN District: 07		

Full Name (Last, First, Middle Initial) <b>B. Englehart Group</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2012
Mailing Address 405 Massachusetts Ave Ste 300		Amount of Each Disbursement this Period 4171.55 <b>Transaction ID : SB17.4312</b>
City Indianapolis	State IN Zip Code 46204	
Purpose of Disbursement services related to upcoming mailers and other printed avertisting media		Category/Type
Candidate Name <b>Carlos May 2012</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IN District: 07		

Full Name (Last, First, Middle Initial) <b>c. Federal Express</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2012
Mailing Address 120 Monument Circle		Amount of Each Disbursement this Period 23.06 <b>Transaction ID : SB17.4324</b>
City Indianapolis	State IN Zip Code 46204	
Purpose of Disbursement printing of campaign materials related to fundraisers and advertising		Category/Type 001
Candidate Name <b>Carlos May 2012</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IN District: 07		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	4794.61
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 18			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Carlos May 2012**

Full Name (Last, First, Middle Initial) <b>A. Federal Express</b>		Date of Disbursement MM / DD / YYYY 05 / 15 / 2012
Mailing Address 120 Monument Circle		Amount of Each Disbursement this Period 35.88 <b>Transaction ID : SB17.4330</b>
City Indianapolis State IN Zip Code 46204	Purpose of Disbursement printing of campaign materials related to fundraisers and advertising Category/Type 001	
Candidate Name Carlos May 2012	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IN District: 07		

Full Name (Last, First, Middle Initial) <b>B. Federal Express</b>		Date of Disbursement MM / DD / YYYY 05 / 28 / 2012
Mailing Address 120 Monument Circle		Amount of Each Disbursement this Period 5.64 <b>Transaction ID : SB17.4327</b>
City Indianapolis State IN Zip Code 46204	Purpose of Disbursement printing of campaign materials related to fundraisers and advertising Category/Type 001	
Candidate Name Carlos May 2012	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IN District: 07		

Full Name (Last, First, Middle Initial) <b>c. Federal Express</b>		Date of Disbursement MM / DD / YYYY 06 / 26 / 2012
Mailing Address 120 Monument Circle		Amount of Each Disbursement this Period 13.92 <b>Transaction ID : SB17.4325</b>
City Indianapolis State IN Zip Code 46204	Purpose of Disbursement printing of campaign materials related to fundraisers and advertising Category/Type 001	
Candidate Name Carlos May 2012	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IN District: 07		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	55.44
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 OF 18	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Carlos May 2012**

Full Name (Last, First, Middle Initial) <b>A. Federal Express</b>		Date of Disbursement MM / DD / YYYY 06 / 28 / 2012
Mailing Address 120 Monument Circle		Amount of Each Disbursement this Period 0.21 <b>Transaction ID : SB17.4326</b>
City Indianapolis	State IN Zip Code 46204	
Purpose of Disbursement printing of campaign materials related to fundraisers and advertising		Category/Type 001
Candidate Name <b>Carlos May 2012</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IN District: 07		

Full Name (Last, First, Middle Initial) <b>B. Front Porch Strategies</b>		Date of Disbursement MM / DD / YYYY 05 / 02 / 2012
Mailing Address 339 Andscott Drive		Amount of Each Disbursement this Period 78.00 <b>Transaction ID : SB17.4319</b>
City Brownsburg	State IN Zip Code 46112	
Purpose of Disbursement fee for campaign marketing materials		Category/Type 004
Candidate Name <b>Carlos May 2012</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IN District: 07		

Full Name (Last, First, Middle Initial) <b>c. Joshua Gonzales</b>		Date of Disbursement MM / DD / YYYY 05 / 25 / 2012
Mailing Address 2330 Carrollton Ave		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.4318</b>
City Indianapolis	State IN Zip Code 46205	
Purpose of Disbursement provide services as campaign manager such as organizing campaign strategies and fundraiser		Category/Type 001
Candidate Name <b>Carlos May 2012</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IN District: 07		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	578.21
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 18			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Carlos May 2012**

Full Name (Last, First, Middle Initial) <b>A. Joshua Gonzales</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address 2330 Carrollton Ave		Amount of Each Disbursement this Period 395.00 <b>Transaction ID : SB17.4317</b>
City Indianapolis	State IN	
Purpose of Disbursement provide services as campaign manager such as organizing campaign strategies and fundraiser		Category/ Type 001
Candidate Name <b>Carlos May 2012</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IN	District: 07	

Full Name (Last, First, Middle Initial) <b>B. Michael Emerson Miller Communication Design</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address 320 S Dunn St		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17.4315</b>
City Bloomington	State IN	
Purpose of Disbursement Assist in designing campaign website		Category/ Type 001
Candidate Name <b>Carlos May 2012</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IN	District: 07	

Full Name (Last, First, Middle Initial) <b>c. Office Max</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2012
Mailing Address 2110 E County Line Rd		Amount of Each Disbursement this Period 280.04 <b>Transaction ID : SB17.4321</b>
City Indianapolis	State IN	
Purpose of Disbursement campaign office supplies		Category/ Type 001
Candidate Name <b>Carlos May 2012</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IN	District: 07	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1675.04
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 18			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Carlos May 2012**

Full Name (Last, First, Middle Initial) <b>A. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 30 / 2012</b>
Mailing Address 144 2nd St		Amount of Each Disbursement this Period <b>37.13</b> <b>Transaction ID : SB17.4335</b>
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Fees to organization for online donation processing Category/Type <b>003</b>	
Candidate Name <b>Carlos May 2012</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IN District: 07		

Full Name (Last, First, Middle Initial) <b>B. Postmaster</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 01 / 2012</b>
Mailing Address 203 E Jefferson St		Amount of Each Disbursement this Period <b>1996.08</b> <b>Transaction ID : SB17.4309</b>
City Tipton State IN Zip Code 46072	Purpose of Disbursement Fees associated with Campaign Mailer Category/Type <b>004</b>	
Candidate Name <b>Carlos May 2012</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IN District: 07		

Full Name (Last, First, Middle Initial) <b>c. Postmaster</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 10 / 2012</b>
Mailing Address 203 E Jefferson St		Amount of Each Disbursement this Period <b>1996.08</b> <b>Transaction ID : SB17.4314</b>
City Tipton State IN Zip Code 46072	Purpose of Disbursement Fees associated with Campaign Mailer Category/Type <b>004</b>	
Candidate Name <b>Carlos May 2012</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IN District: 07		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>4029.29</b>
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 18			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Carlos May 2012**

Full Name (Last, First, Middle Initial) <b>A. Premiere Advertising</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2012
Mailing Address 2704 E 62nd Street		Amount of Each Disbursement this Period 280.55 <b>Transaction ID : SB17.4311</b>
City Indianapolis State IN Zip Code 46220	Purpose of Disbursement campaign stickers 003 Category/Type	
Candidate Name <b>Carlos May 2012</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IN District: 07		

Full Name (Last, First, Middle Initial) <b>B. Benjamin Roeger</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2012
Mailing Address 515 Lynton Way		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : SB17.4341</b>
City Westfield State IN Zip Code 46074	Purpose of Disbursement In-kind - work on accounting for campaign transactions, FEC reporting matters 001 Category/Type	
Candidate Name <b>Carlos May 2012</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IN District: 07		

Full Name (Last, First, Middle Initial) <b>c. Benjamin Roeger</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address 515 Lynton Way		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : SB17.4337</b>
City Westfield State IN Zip Code 46074	Purpose of Disbursement In-kind - account for campaign transactions, work on FEC reporting matters 001 Category/Type	
Candidate Name <b>Carlos May 2012</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IN District: 07		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	680.55
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 OF 18	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Carlos May 2012**

Full Name (Last, First, Middle Initial) <b>A. Benjamin Roeger</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 30 / 2012</b>
Mailing Address 515 Lynton Way		Amount of Each Disbursement this Period <b>200.00</b>
City State Zip Code <b>Westfield IN 46074</b>	Purpose of Disbursement In-kind - work on accounting for campaign transactions, FEC reporting matters <b>001</b>	
Candidate Name <b>Carlos May 2012</b>		<b>Transaction ID : SB17.4339</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IN District: 07		

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>200.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>12013.14</b>