REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

1. NAME OF COMMITTEE (in full)
Indiana Medical Political Action Committee

ADDRESS (number and street) ☐ Check if different than previously reported
322 Canal Walk Canal Level

2. FEC IDENTIFICATION NUMBER
C00000836

CITY, STATE, and ZIP CODE
Indianapolis IN 46202

3. ☐ This committee has qualified as a multi-candidate committee (see FEC Form 1M)

4. TYPE OF REPORT

(a) ☒ April 15 Quarterly Report

☐ July 15 Quarterly Report

☐ October 15 Quarterly Report

☐ January 31 Year End Report

☐ July 31 Mid-Year Report (Non-election Year Only)

☐ Termination report

Monthly Report Due On:

☐ February 20 ☐ June 20 ☐ October 20
☐ March 20 ☐ July 20 ☐ November 20
☐ April 20 ☐ August 20 ☐ December 20
☐ May 20 ☐ September 20 ☐ January 31

☐ Twelfth day report preceding _____ (election type)
election on _____ in the State of _____

☐ Thirtieth day report following the General Election
on _____ in the State of _____

(b) Is this Report an Amendment ☐ YES ☒ NO

SUMMARY 5. Covering Period 01/01/2000 through 03/31/2000	**COLUMN A** **This Period**	**COLUMN B** **Calendar Year-to-Date**
6. (a) Cash on Hand, January 1, 2000		146437.65
(b) Cash on Hand at Beginning of Reporting Period	146437.65	
(c) Total Receipts (from line 19)	94096.70	94096.70
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	240534.35	240534.35
7. Total Disbursements (from line 30)	98616.85	98616.85
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	141917.50	141917.50
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY 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 202-219-3420

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
Electronically Filed by Scott Wagner, M.D.

Signature of Treasurer

Date
04/11/2000

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

FEC FORM 3X
(revised 9/98)

4-00173

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
(PAGE 2, FEC FORM 3X) (revised 1/1/91)

NAME OF COMMITTEE
Indiana Medical Political Action Committee

REPORT COVERING PERIOD
FROM 01/01/2000 TO: 03/31/2000

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year	
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	3660.00	3660.00	11.a.i.
ii. Unitemized	88838.00	88838.00	11.a.ii.
iii. Total (add i and ii)»	92498.00	92498.00	11.a.iii.
b. Political Party Committees	0.00	0.00	11.b.
c. Other Political Committees (such as PACs)	0.00	0.00	11.c.
d. Total Contributions (add a iii, b and c)»	92498.00	92498.00	11.d.
12. Transfers From Affiliated/Other Party Committees	508.00	508.00	12.
13. All Loans Received	0.00	0.00	13.
14. Loan Repayments Received	0.00	0.00	14.
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00	15.
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00	16.
17. Other Federal Receipts (Dividends, Interest, etc.)	1090.70	1090.70	17.
18. Transfers From Nonfederal Account for Joint Activity	0.00	0.00	18.
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18)»	94096.70	94096.70	19.
20. Total Federal Receipts (subtract line 18 from line 19)»	94096.70	94096.70	20.
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0.00	0.00	21.a.i.
ii. Non-Federal Share	0.00	0.00	21.a.ii.
b. Other Federal Operating Expenditures	4156.85	4156.85	21.b.
c. Total Operating Expenditures (add a i, a ii, and b)»	4156.85	4156.85	21.c.
22. Transfers to Affiliated/Other Party Committees	61710.00	61710.00	22.
23. Contributions to Federal Candidates/Committees and Other Political Committees	0.00	0.00	23.
24. Independent Expenditures (use Schedule E)	0.00	0.00	24.
25. Coordinated Expenditures Made by Party Committees (2 U.S.C 441a(d)) (use Sch. F)	0.00	0.00	25.
26. Loan Repayments Made	0.00	0.00	26.
27. Loans Made	0.00	0.00	27.
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	0.00	0.00	28.a.
b. Political Party Committees	0.00	0.00	28.b.
c. Other Political Committees (such as PACs)	0.00	0.00	28.c.
d. Total Contributions Refunds (add a, b, and c)»	0.00	0.00	28.d.
29. Other Disbursements	32750.00	32750.00	29.
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29)»	98616.85	98616.85	30.
31. Total Federal Disbursements (subtract line 21 a ii from line 30)»	98616.85	98616.85	31.
III. Net Contributions / Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)	92498.00	92498.00	32.
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33.
34. Net Contributions (other than loans) (subtract line 33 from 32)	92498.00	92498.00	34.
35. Total Federal Operating Expenditures (add 21 a i and 21 b)»	4156.85	4156.85	35.
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36.
37. Net Operating Expenditures (subtract line 36 from 35)»	4156.85	4156.85	37.

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	3 / 16 FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (In Full)
Indiana Medical Political Action Committee

Full Name, Mailing Address, and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Alan Culbreth, M.D. P.O. Box 1580 Madison IN 47250 Receipt For: [X] Primary [ ] General [ ] Other (specify) :	Self Occupation: Physician Aggregate Year-to-Date > $ 365.00	01/04/2000	365.00 Membership
Carolyn Cunningham, M.D. 4000 North Meridian Street, 6H Indianapolis IN 46208 Receipt For: [X] Primary [ ] General [ ] Other (specify) :	Self Occupation: Physician Aggregate Year-to-Date > $ 365.00	01/04/2000	365.00 Membership
Edward Probst, M.D. 1920 Franklin Street Columbus IN 47201 Receipt For: [X] Primary [ ] General [ ] Other (specify) :	Self Occupation: Physician Aggregate Year-to-Date > $ 500.00	01/05/2000	500.00 Membership
Stephen Tharp, M.D. 4536 North Wildwood Drive Frankfort IN 46041 Receipt For: [X] Primary [ ] General [ ] Other (specify) :	Self Occupation: Physician Aggregate Year-to-Date > $ 400.00	01/06/2000	400.00 Membership
John MacDougall, M.D. 7202 Dean Road Indianapolis IN 46240 Receipt For: [X] Primary [ ] General [ ] Other (specify) :	Self Occupation: Physician Aggregate Year-to-Date > $ 500.00	01/19/2000	500.00 Membership
Paula Hall, M.D. P.O. Box 55847 Indianapolis IN 46205 Receipt For: [X] Primary [ ] General [ ] Other (specify) :	Self Occupation: Physician Aggregate Year-to-Date > $ 365.00	01/20/2000	365.00 Membership
Bernard Emkes, M.D. 11479 Valley Meadow Drive Zionsville IN 46077 Receipt For: [X] Primary [ ] General [ ] Other (specify) :	Self Occupation: Physician Aggregate Year-to-Date > $ 500.00	02/23/2000	500.00 Membership

SUBTOTALS of Receipts This Page (Optional) .....

TOTALS This Period (last page this line number only) .....

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	4 / 16 FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (In Full)
Indiana Medical Political Action Committee

Full Name, Mailing Address, and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Tom Brubaker, M.D. 79728 55th Street Decatur MI 49045 Receipt For: [X] Primary [ ] General [ ] Other (specify) :	Self Occupation: Physician Aggregate Year-to-Date > $ 365.00	03/01/2000	365.00 Membership
Full Name, Mailing Address, and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Marvin Priddy, M.D. 1329 Latimer Court Fort Wayne IN 46825 Receipt For: [X] Primary [ ] General [ ] Other (specify) :	Self Occupation: Physician Aggregate Year-to-Date > $ 300.00	03/08/2000	300.00 Membership

SUBTOTALS of Receipts This Page (Optional)	
TOTALS This Period (last page this line number only)	**3660.00**

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	5 / 16 FOR LINE NUMBER 12

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NAME OF COMMITTEE (In Full)
Indiana Medical Political Action Committee

Full Name, Mailing Address, and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
American Medical Political Action Committee 1101 Vermont Avenue, NW Washington DC 20005		02/10/2000	508.00 Rebates for Membership
Receipt For: [X] Primary [ ] General [ ] Other (specify) :	Occupation		
	Aggregate Year-to-Date > 5 508.00		

SUBTOTALS of Receipts This Page (Optional)	
TOTALS This Period (last page this line number only)	**508.00**

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	6 / 16 FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Indiana Medical Political Action Committee

Full Name, Mailing Address, and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bank One Indiana 7510 West Washington Street Indianapolis IN 46231		03/31/2000	1090.70 Interest Earned
Receipt For: [X] Primary [ ] General [ ] Other (specify) :	Occupation Aggregate Year-to-Date > 5 1090.70		

SUBTOTALS of Receipts This Page (Optional)	
TOTALS This Period (last page this line number only)	**1090.70**

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	7 / 16 FOR LINE NUMBER 21B

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NAME OF COMMITTEE (In Full)
Indiana Medical Political Action Committee

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
American Quality Press 5508 Elmwood Avenue, Suite 312 Indianapolis IN 46203	Printing Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	01/03/2000	218.00
American Quality Press 5508 Elmwood Avenue, Suite 312 Indianapolis IN 46203	Printing Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	01/11/2000	1868.00
Indiana State Medical Association 322 Canal Walk, Canal Level Indianapolis IN 46202	Administrative Expenses Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	02/07/2000	730.00
Barney Maynard, M.D. 1225 Springcreek Drive Evansville IN 47710	Mileage/Expense Reimbursement Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/09/2000	397.95

SUBTOTALS of Disbursements This Page (Optional)	
TOTALS This Period (last page this line number only)	**3213.95**

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	8 / 16 FOR LINE NUMBER 22

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NAME OF COMMITTEE (In Full)
Indiana Medical Political Action Committee

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
American Medical Political Action Committee 1101 Vermont Avenue, NW Washington DC 20005	Memberships Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	01/07/2000	32540.00
American Medical Political Action Committee 1101 Vermont Avenue, NW Washington DC 20005	Memberships Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	02/01/2000	21660.00
American Medical Political Action Committee 1101 Vermont Avenue, NW Washington DC 20005	Memberships Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	7510.00

SUBTOTALS of Disbursements This Page (Optional)	
TOTALS This Period (last page this line number only)	**61710.00**

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	9 / 16 FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)
Indiana Medical Political Action Committee

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ben Giaquinta for State Representative 4443 Pembroke Lane Fort Wayne IN 46807	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	250.00
Beverly Gard for State Senate 3660 N 50 E Greenfield IN 46140	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	750.00
Billie Breaux for State Senate 5155 North Arlington Indianapolis IN 46226	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	500.00
Charlie Brown for State Representative 9439 Lake Shore Drive Gary IN 46403	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	750.00
Chester Dobis for State Representative 6565 Marshall Court Merrillville IN 46410	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	300.00
Cleo Duncan for State Representative 1205 East Tara Road Greensburg IN 47240	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	250.00
Connie Lawson for State Senate 3891 W CR 100 South Danville IN 46122	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	750.00
Craig Fry for State Representative 637 Bay View Drive Mishawaka IN 46544	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	500.00
Dale Grubb for State Representative P.O. Box 9 Covington IN 47932	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	500.00
SUBTOTALS of Disbursements This Page (Optional)			
TOTALS This Period (last page this line number only)			

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	10 / 16 FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)
Indiana Medical Political Action Committee

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Dale Sturtz for State Representative 2770 N 200 E LaGrange IN 46761	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	300.00
David Crooks for State Representative 1205 Winbrook Lane Washington IN 47501	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	250.00
David Yount for State Representative 3811 Oriole Drive Columbus IN 47203	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	250.00
Duane Cheney for State Representative 2700 Tecumseh Street Portage IN 46368	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	500.00
Earl Harris for State Representative 4114 Butternut Street East Chicago IN 46312	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	500.00
Earline Rogers for State Senate 3636 West 15th Avenue Gary IN 46404	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	500.00
Ed Mahern for State Representative 2707 Allen Avenue Indianapolis IN 46203	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	250.00
Frank O'Bannon for Governor State House Indianapolis IN 46204	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	200.00
Gary Dillon for State Representative 331 North Chauncey Columbia City IN 46725	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	1000.00

SUBTOTALS of Disbursements This Page (Optional) .....

TOTALS This Period (last page this line number only) .....

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	11 / 16 FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)
Indiana Medical Political Action Committee

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Glenn Howard for State Senate 1005 West 36 Street Indianapolis IN 46208	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	500.00
Greg Porter for State Representative 3614 North Pennsylvania Street Indianapolis IN 46205	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	500.00
Greg Server for State Senate 5601 Springlake Drive Evansville IN 47710	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	250.00
J.D. Lux for State Representative 485 Tailholt Lane Shelbyville IN 46176	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	250.00
Jack Lutz for State Representative 1210 Alexandria Pike #4 Anderson IN 46012	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	250.00
James Atterholt 7920 Evanston Road Indianapolis IN 46240	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	300.00
Jeb Bardon for State Representative 5741 Little Creek Drive Apartment D Indianapolis IN 46254	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	500.00
Jeffrey Espich for State Representative 1250 West Hancock Street Box 158 Uniondale IN 46791	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	500.00
Jerry Denbo for State Representative R.R. 1, Box 329 French Lick IN 47432	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	250.00
SUBTOTALS of Disbursements This Page (Optional)			
TOTALS This Period (last page this line number only)			

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	12 / 16 FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)
Indiana Medical Political Action Committee

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
John Frenz for State Representative P.O. Box B Vincennes IN 47591	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	500.00
John Gregg for State Representative 112 North 7th Vincennes IN 47591	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	1500.00
Kent Adams for State Senate 105 Beechwood Drive P.O. Box 5 Bremen IN 46506	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	500.00
Lawrence Borst for State Senate 681 Foxmere Terrace Greenwood IN 46142	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	500.00
Lawrence Buell for State Representative 2502 Silver Lane Drive Indianapolis IN 46203	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	250.00
Luke Kenley for State Senate 102 Harbour Trees Lane Noblesville IN 46060	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	500.00
Mae Dickinson for State Representative 5455 North Arlington Avenue Indianapolis IN 46226	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	250.00
Mark Kruzan for State Representative 111 East Sixth Bloomington IN 47408	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	500.00
Mary Kay Budak for State Representative 5144 North Pawnee Trail LaPorte IN 46350	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	500.00
SUBTOTALS of Disbursements This Page (Optional)			
TOTALS This Period (last page this line number only)			

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	13 / 16 FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)
Indiana Medical Political Action Committee

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Michael Smith for State Representative P.O. Box 1 Rensselaer IN 47978	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	250.00
Pat Miller for State Senate 1041 South Musing Road Indianapolis IN 46239	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	1500.00
Patrick Bauer for State Representative 1307 Sunnymeade South Bend IN 46615	Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	500.00
Paul Mannweiler for State Representative Room 3-7, State House Indianapolis IN 46204	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	1000.00
Phyllis Pond for State Representative 8530 Seiler Road New Haven IN 46774	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	300.00
Ralph Ayres for State Representative 520 Park Avenue Chesterton IN 46304	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	500.00
Richard Mangus for State Representative 68735 U.S. 31 Lakeville IN 46536	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	250.00
Robert Alderman for State Representative 5715 Kroemer Road Fort Wayne IN 46818	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	250.00
Robert Behning for State Representative 6360 Rockville Road Indianapolis IN 46214	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	250.00
SUBTOTALS of Disbursements This Page (Optional)			
TOTALS This Period (last page this line number only)			

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	14 / 16 FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)
Indiana Medical Political Action Committee

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Robert Bischoff for State Representative 1023 Fairview Street Lawrenceburg IN 47025	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	250.00
Robert Jackman for State Senate 352 W SR 244 Milroy IN 46156	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	500.00
Robert Meeks for State Senate 5840 East 25 N LaGrange IN 46761	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	500.00
Ron Herrell for State Representative 5100 North 50 East Kokomo IN 46901	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	750.00
Ron Liggett for State Representative 7463 South 1000 West Redkey IN 47373	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	250.00
Scott Mellinger for State Representative 401 South Pendleton Avenue Pendleton IN 46064	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	300.00
Scott Pelath for State Representative 1030 North Karwick Michigan City IN 46360	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	500.00
Steve Carter for Attorney General P.O. Box 501962 Indianapolis IN 46250	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	2000.00
Terry Goodin for State Representative 409 Seymour Road Crothersville IN 47229	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	500.00

SUBTOTALS of Disbursements This Page (Optional) .....

TOTALS This Period (last page this line number only) .....

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	15 / 16 FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)
Indiana Medical Political Action Committee

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Tim Brown for State Representative P.O. Box 661 Crawfordsville IN 47933	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	250.00
Tiny Adams for State Representative 2105 North Walnut Muncie IN 47303	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	250.00
Vanessa Summers for State Representative 2515 East 34th Street Indianapolis IN 46218	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	250.00
Vaneta Becker for State Representative 4017 Cobble Field Drive Evansville IN 47711	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	500.00
Vernon Smith for State Representative P.O. Box M622 Gary IN 46401	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	200.00
Vi Simpson for State Senate 4965 West Woodland Drive Bloomington IN 47404	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	500.00
Vidya Kora, M.D. for LaPorte County Coroner 5085 Laxita Drive LaPorte IN 46350	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	2000.00
William Alexa for State Senate 2207 Shannon Drive Valparaiso IN 46383	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	250.00
William Cochran for State Representative 4330 Green Valley Road New Albany IN 47150	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	250.00
SUBTOTALS of Disbursements This Page (Optional)			
TOTALS This Period (last page this line number only)			

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	16 / 16 FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)
Indiana Medical Political Action Committee

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
William Crawford for State Representative P.O. Box 18446 Indianapolis IN 46218	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	350.00
William Ruppel for State Representative 909 S.R. 13 W North Manchester IN 46962	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	250.00
Winfield Moses for State Representative 6000 North Oak Boulevard Fort Wayn IN 46818	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/02/2000	250.00
Pat Miller for State Senate 1041 South Musing Road Indianapolis IN 46239	Fundraiser (3/29) Disbursement for: [X] Primary [ ] General [ ] Other (specify) :	03/16/2000	500.00

SUBTOTALS of Disbursements This Page (Optional)	
TOTALS This Period (last page this line number only)	**32750.00**