

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
Indiana Democratic Congressional Victory Committee

ADDRESS (number and street) One North Capitol Suite 200  
 Check if different than previously reported. (ACC)  
Indianapolis IN 46204

2. **FEC IDENTIFICATION NUMBER** C00108613  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 01 01 2005 through 01 31 2005

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 Mrs Linda M Buzinec

Signature of Treasurer Electronically Filed by Mrs Linda M Buzinec Date 09 23 2008

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

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Indiana Democratic Congressional Victory Committee

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To: 

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	5

	COLUMN A This Period	COLUMN B Calendar Year-to-Date										
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>	Y	Y	Y	Y	2	0	0	5	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td> </td></tr></table>		<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td align="right">191846.25</td></tr></table>	191846.25
Y	Y	Y	Y									
2	0	0	5									
191846.25												
(b) Cash on Hand at Beginning of Reporting Period .....	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td align="right">191846.25</td></tr></table>	191846.25										
191846.25												
(c) Total Receipts (from Line 19) .....	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td align="right">94858.83</td></tr></table>	94858.83	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td align="right">94858.83</td></tr></table>	94858.83								
94858.83												
94858.83												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td align="right">286705.08</td></tr></table>	286705.08	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td align="right">286705.08</td></tr></table>	286705.08								
286705.08												
286705.08												
7. Total Disbursements (from Line 31) .....	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td align="right">118429.67</td></tr></table>	118429.67	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td align="right">118429.67</td></tr></table>	118429.67								
118429.67												
118429.67												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td align="right">168275.41</td></tr></table>	168275.41	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td align="right">168275.41</td></tr></table>	168275.41								
168275.41												
168275.41												
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td align="right">0.00</td></tr></table>	0.00										
0.00												
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td align="right">0.00</td></tr></table>	0.00										
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 Democratic Congressional Victory Committee

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To: 

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	5

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	0.00	0.00
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	142.00	142.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	142.00	142.00
(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) .....	142.00	142.00
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) .....	16244.65	16244.65
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	24285.00	24285.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	54187.18	54187.18
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	54187.18	54187.18
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	94858.83	94858.83
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	40671.65	40671.65

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	5698.52	5698.52
(ii) Non-Federal Share.....	21380.48	21380.48
(b) Other Federal Operating Expenditures.....	35403.82	35403.82
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	62482.82	62482.82
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 Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	639.33	639.33
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.....	46855.44	46855.44
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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 .....	8452.08	8452.08
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	8452.08	8452.08
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	118429.67	118429.67
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	97049.19	97049.19

**DETAILED SUMMARY PAGE**  
of Disbursements

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 .....	142.00	142.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	142.00	142.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	41102.34	41102.34
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	16244.65	16244.65
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	24857.69	24857.69

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 50

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 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 Democratic Congressional Victory Committee

**A.**

Full Name (Last, First, Middle Initial)

Julia Carson for Congress

Mailing Address 302 N East St

City State Zip Code  
Indianapolis IN 46202-3611

FEC ID number of contributing federal political committee. **C** C00311969

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
711.01

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 3 / 2 0 0 5

Transaction ID: C215117

Amount of Each Receipt this Period  
347.42

**B.**

Full Name (Last, First, Middle Initial)

Julia Carson for Congress

Mailing Address 302 N East St

City State Zip Code  
Indianapolis IN 46202-3611

FEC ID number of contributing federal political committee. **C** C00311969

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
711.01

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 3 / 2 0 0 5

Transaction ID: C215118

Amount of Each Receipt this Period  
363.59

Offset for Rent

**C.**

Full Name (Last, First, Middle Initial)

Marion County Democratic Central Cmte

Mailing Address 603 E Washington St

City State Zip Code  
Indianapolis IN 46204-2695

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
13986.52

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 8 / 2 0 0 5

Transaction ID: C65158

Amount of Each Receipt this Period  
13986.52

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

14697.53

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 50  
(check only one)

<input type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input checked="" type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

**A.** Full Name (Last, First, Middle Initial)  
Evan Bayh Committee

Mailing Address 1099 N Meridian St

City State Zip Code  
Indianapolis IN 46204-1030

FEC ID number of contributing federal political committee. **C** C00306860

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1547.12

Date of Receipt  
M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 5

Transaction ID: C82691

Amount of Each Receipt this Period  
1547.12

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1547.12
<b>TOTAL</b> This Period (last page this line number only) .....	▶	16244.65

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 8 / 50	
(check only one)			
<input type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input checked="" type="checkbox"/>	17		

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NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

A.

Full Name (Last, First, Middle Initial) Auditor of State of Indiana	
Mailing Address 200 W Washington St	
City Indianapolis	State IN
Zip Code 46204	
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) ▼	Aggregate Year-to-Date ▼ 24285.00

Date of Receipt
M M / D D / Y Y Y Y 0 1 / 1 8 / 2 0 0 5
Transaction ID: C167161
Amount of Each Receipt this Period 24285.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	24285.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	24285.00

**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 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 Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Mr. Michael D. Edmondson	Transaction ID: D6080 Date of Disbursement 01 / 21 / 2005
	Mailing Address 1530 E 81st St	
	City Indianapolis State IN Zip Code 46240-2716	Amount of Each Disbursement this Period 2493.68
	Purpose of Disbursement payroll Candidate Name	Category/Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Denison Parking, INC.	Transaction ID: D264507 Date of Disbursement 01 / 10 / 2005
	Mailing Address 36 S Pennsylvania St Ste 200	
	City Indianapolis State IN Zip Code 46204-3627	Amount of Each Disbursement this Period 1320.00
	Purpose of Disbursement parking Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Anthem BCBS IN GROUP	Transaction ID: D237465 Date of Disbursement 01 / 24 / 2005
	Mailing Address PO Box 105113	
	City Atlanta State GA Zip Code 30348-5113	Amount of Each Disbursement this Period 3633.01
	Purpose of Disbursement health insurance Candidate Name	001 Category/Type
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	7446.69
<b>TOTAL</b> 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 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 Democratic Congressional Victory Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Internal Revenue Service <hr/> Mailing Address Cincinnati Commerce Ctr <hr/> City Cincinnati State OH Zip Code 45999 <hr/> Purpose of Disbursement payroll taxes Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D5520 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 0 7 / 2 0 0 5
	Amount of Each Disbursement this Period 2814.17
	Category/ Type
	Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Indiana Dept of Workforce Development <hr/> Mailing Address 10 N Senate Ave <hr/> City Indianapolis State IN Zip Code 46204-2201 <hr/> Purpose of Disbursement payroll taxes Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D5522 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 0 7 / 2 0 0 5
	Amount of Each Disbursement this Period 330.82
	Category/ Type
	Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Indiana Dept of Workforce Development <hr/> Mailing Address 10 N Senate Ave <hr/> City Indianapolis State IN Zip Code 46204-2201 <hr/> Purpose of Disbursement payroll taxes Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D5527 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 2 1 / 2 0 0 5
	Amount of Each Disbursement this Period 259.14
	Category/ Type
	Category/ Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

3404.13

**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 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 Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Indiana Dept of Workforce Development	Transaction ID: D5528 Date of Disbursement
	Mailing Address 10 N Senate Ave	<input type="text" value="01"/> <input type="text" value="21"/> / <input type="text" value="20"/> <input type="text" value="05"/>
	City Indianapolis State IN Zip Code 46204-2201	Amount of Each Disbursement this Period
	Purpose of Disbursement payroll taxes	<input type="text" value="615.87"/>
	Candidate Name	Category/Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Indiana Dept of Workforce Development	Transaction ID: D5579 Date of Disbursement
	Mailing Address 10 N Senate Ave	<input type="text" value="01"/> <input type="text" value="07"/> / <input type="text" value="20"/> <input type="text" value="05"/>
	City Indianapolis State IN Zip Code 46204-2201	Amount of Each Disbursement this Period
	Purpose of Disbursement payroll taxes	<input type="text" value="26.25"/>
	Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Indiana Dept of Workforce Development	Transaction ID: D242467 Date of Disbursement
	Mailing Address 10 N Senate Ave	<input type="text" value="01"/> <input type="text" value="07"/> / <input type="text" value="20"/> <input type="text" value="05"/>
	City Indianapolis State IN Zip Code 46204-2201	Amount of Each Disbursement this Period
	Purpose of Disbursement payroll taxes	<input type="text" value="700.69"/>
	Candidate Name	Category/Type
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1342.81"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# 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 Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Jewett Printing	Transaction ID: D5515 Date of Disbursement 01 / 06 / 2005
	Mailing Address 101 W Ohio St Ste 2000	Amount of Each Disbursement this Period 15339.55
	City Indianapolis State IN Zip Code 46204-4204	
	Purpose of Disbursement printing	
	Candidate Name	Category/Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Mr. Joel C. Miller	Transaction ID: D5519 Date of Disbursement 01 / 07 / 2005
	Mailing Address 338 N Kitley Ave	Amount of Each Disbursement this Period 788.62
	City Indianapolis State IN Zip Code 46219-6217	
	Purpose of Disbursement marion co. payroll	
	Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Mr. William G. French, II	Transaction ID: D6081 Date of Disbursement 01 / 21 / 2005
	Mailing Address 5205 E North St	Amount of Each Disbursement this Period 1779.68
	City Indianapolis State IN Zip Code 46219-5633	
	Purpose of Disbursement payroll	
	Candidate Name	Category/Type
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	17907.85
<b>TOTAL</b> 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 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 Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Mrs. Kimberly N Bostic	Transaction ID: D6079 Date of Disbursement 01 / 21 / 2005
	Mailing Address 6864 W Philadelphia Dr	
	City Mc Cordsville State IN Zip Code 46055-9325	Amount of Each Disbursement this Period 1162.42
	Purpose of Disbursement payroll Candidate Name	Category/Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Ms. Jennifer L. Grawcock	Transaction ID: D5518 Date of Disbursement 01 / 07 / 2005
	Mailing Address 5954 Dewey Ave	
	City Indianapolis State IN Zip Code 46219	Amount of Each Disbursement this Period 1301.57
	Purpose of Disbursement payroll Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) PrimePay	Transaction ID: D5536 Date of Disbursement 01 / 11 / 2005
	Mailing Address 9382 Priority Way West Dr	
	City Indianapolis State IN Zip Code 46240	Amount of Each Disbursement this Period 117.65
	Purpose of Disbursement payroll service Candidate Name	Category/Type
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2581.64
<b>TOTAL</b> 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 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 Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) PrimePay	Transaction ID: D5565 Date of Disbursement
	Mailing Address 9382 Priority Way West Dr	<input type="text" value="01"/> / <input type="text" value="23"/> / <input type="text" value="2005"/>
	City Indianapolis State IN Zip Code 46240	Amount of Each Disbursement this Period
	Purpose of Disbursement payroll service	<input type="text" value="135.00"/>
	Candidate Name	Category/Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Indiana Department of Revenue	Transaction ID: D5521 Date of Disbursement
	Mailing Address 100 North Senate Ave	<input type="text" value="01"/> / <input type="text" value="07"/> / <input type="text" value="2005"/>
	City Indianapolis State IN Zip Code 46204	Amount of Each Disbursement this Period
	Purpose of Disbursement payroll taxes	<input type="text" value="386.19"/>
	Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Indiana Department of Revenue	Transaction ID: D5526 Date of Disbursement
	Mailing Address 100 North Senate Ave	<input type="text" value="01"/> / <input type="text" value="21"/> / <input type="text" value="2005"/>
	City Indianapolis State IN Zip Code 46204	Amount of Each Disbursement this Period
	Purpose of Disbursement payroll taxes	<input type="text" value="304.06"/>
	Candidate Name	Category/Type
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="825.25"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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 Democratic Congressional Victory Committee

**A.** Full Name (Last, First, Middle Initial)  
Indiana Department of Revenue

Mailing Address 100 North Senate Ave

City Indianapolis State IN Zip Code 46204

Purpose of Disbursement  
payroll taxes

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D240919

Date of Disbursement

01 / 07 / 2005

Amount of Each Disbursement this Period

804.30

**B.** Full Name (Last, First, Middle Initial)  
Indiana Department of Revenue

Mailing Address 100 North Senate Ave

City Indianapolis State IN Zip Code 46204

Purpose of Disbursement  
payroll tax

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D310315

Date of Disbursement

01 / 07 / 2005

Amount of Each Disbursement this Period

804.30

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

1608.60

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

35116.97

# 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 16 / 50

<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 Democratic Congressional Victory Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Carrie L. Bales <hr/> Mailing Address 706 Hess Ave <hr/> City Evansville State IN Zip Code 47712-5545 <hr/> Purpose of Disbursement payroll Candidate Name <hr/> 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) ▼	<b>Transaction ID:</b> D5516 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 0 7 / 2 0 0 5
	Amount of Each Disbursement this Period 1317.88
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Carrie L. Bales <hr/> Mailing Address 706 Hess Ave <hr/> City Evansville State IN Zip Code 47712-5545 <hr/> Purpose of Disbursement payroll Candidate Name <hr/> 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) ▼	<b>Transaction ID:</b> D5524 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 2 1 / 2 0 0 5
	Amount of Each Disbursement this Period 1317.88
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Linda K. Harris <hr/> Mailing Address 11129 Peppermill Ln <hr/> City Fishers State IN Zip Code 46037-9082 <hr/> Purpose of Disbursement payroll Candidate Name <hr/> 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) ▼	<b>Transaction ID:</b> D239655 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 0 7 / 2 0 0 5
	Amount of Each Disbursement this Period 2540.15
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5175.91
<b>TOTAL</b> 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 Democratic Congressional Victory Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Mrs. Linda K. Harris <hr/> Mailing Address 11129 Peppermill Ln <hr/> City Fishers State IN Zip Code 46037-9082 <hr/> Purpose of Disbursement payroll Candidate Name <hr/> 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) ▼	Transaction ID: D239656 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 1 / 2 0 0 5
	Amount of Each Disbursement this Period 2540.15
	Category/ Type
	Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Michael D. Edmondson <hr/> Mailing Address 1530 E 81st St <hr/> City Indianapolis State IN Zip Code 46240-2716 <hr/> Purpose of Disbursement payroll Candidate Name <hr/> 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) ▼	Transaction ID: D239635 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 7 / 2 0 0 5
	Amount of Each Disbursement this Period 2493.68
	Category/ Type
	Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Internal Revenue Service <hr/> Mailing Address Cincinnati Commerce Ctr <hr/> City Cincinnati State OH Zip Code 45999 <hr/> Purpose of Disbursement payroll taxes Candidate Name <hr/> 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) ▼	Transaction ID: D239233 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 7 / 2 0 0 5
	Amount of Each Disbursement this Period 5688.87
	Category/ Type
	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	10722.70
<b>TOTAL</b> 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 Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Internal Revenue Service	Transaction ID: D5678 Date of Disbursement
	Mailing Address Cincinnati Commerce Ctr	<input type="text" value="01"/> <input type="text" value="21"/> / <input type="text" value="2005"/>
	City Cincinnati State OH Zip Code 45999	Amount of Each Disbursement this Period
	Purpose of Disbursement payroll taxes	<input type="text" value="2290.67"/>
	Candidate Name	Category/Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Internal Revenue Service	Transaction ID: D6082 Date of Disbursement
	Mailing Address Cincinnati Commerce Ctr	<input type="text" value="01"/> <input type="text" value="21"/> / <input type="text" value="2005"/>
	City Cincinnati State OH Zip Code 45999	Amount of Each Disbursement this Period
	Purpose of Disbursement payroll taxes	<input type="text" value="4958.59"/>
	Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Internal Revenue Service	Transaction ID: D310231 Date of Disbursement
	Mailing Address Cincinnati Commerce Ctr	<input type="text" value="01"/> <input type="text" value="15"/> / <input type="text" value="2005"/>
	City Cincinnati State OH Zip Code 45999	Amount of Each Disbursement this Period
	Purpose of Disbursement payroll tax	<input type="text" value="813.00"/>
	Candidate Name	Category/Type
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="8062.26"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# 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 Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Internal Revenue Service  Mailing Address Cincinnati Commerce Ctr  City Cincinnati State OH Zip Code 45999  Purpose of Disbursement payroll taxes 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) ▼	Transaction ID: D310314 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 1 / 2 0 0 5	Amount of Each Disbursement this Period 4958.59
B.	Full Name (Last, First, Middle Initial) Mrs. Alisha R. Valentine  Mailing Address 960 E Berwyn St  City Indianapolis State IN Zip Code 46203-5115  Purpose of Disbursement Davis payroll 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) ▼	Transaction ID: D238144 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 7 / 2 0 0 5	Amount of Each Disbursement this Period 1201.15
C.	Full Name (Last, First, Middle Initial) Mrs. Kimberly N Bostic  Mailing Address 6864 W Philadelphia Dr  City Mc Cordsville State IN Zip Code 46055-9325  Purpose of Disbursement payroll 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) ▼	Transaction ID: D240384 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 1 / 2 0 0 5	Amount of Each Disbursement this Period 1162.42

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7322.16
<b>TOTAL</b> 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 Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Mrs. Kimberly N Bostic	Transaction ID: D240392 Date of Disbursement 01 / 07 / 2005
	Mailing Address 6864 W Philadelphia Dr	
	City Mc Cordsville State IN Zip Code 46055-9325	Amount of Each Disbursement this Period 1162.42
	Purpose of Disbursement payroll Candidate Name	Category/Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Ms. Leatrice Webb-Parks	Transaction ID: D239753 Date of Disbursement 01 / 07 / 2005
	Mailing Address 5443 Milroy Rd	
	City Indianapolis State IN Zip Code 46216-2087	Amount of Each Disbursement this Period 753.41
	Purpose of Disbursement payroll Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Ms. Leatrice Webb-Parks	Transaction ID: D239754 Date of Disbursement 01 / 21 / 2005
	Mailing Address 5443 Milroy Rd	
	City Indianapolis State IN Zip Code 46216-2087	Amount of Each Disbursement this Period 753.41
	Purpose of Disbursement payroll Candidate Name	Category/Type
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2669.24
<b>TOTAL</b> 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 Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Mrs. Michele Miller	Transaction ID: D238742 Date of Disbursement 01 / 07 / 2005
	Mailing Address 11342 Fairweather Pl	
	City Indianapolis State IN Zip Code 46229-4982	Amount of Each Disbursement this Period 919.42
	Purpose of Disbursement peterson payroll	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) ▼

B.	Full Name (Last, First, Middle Initial) Mrs. Michele Miller	Transaction ID: D238743 Date of Disbursement 01 / 21 / 2005
	Mailing Address 11342 Fairweather Pl	
	City Indianapolis State IN Zip Code 46229-4982	Amount of Each Disbursement this Period 919.42
	Purpose of Disbursement payroll	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) ▼

C.	Full Name (Last, First, Middle Initial) Mr. William G. French, II	Transaction ID: D238936 Date of Disbursement 01 / 07 / 2005
	Mailing Address 217 S Ritter Ave	
	City Indianapolis State IN Zip Code 46219-7129	Amount of Each Disbursement this Period 1779.68
	Purpose of Disbursement payroll	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	3618.52
<b>TOTAL</b> 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)

PAGE 22 / 50

<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 Democratic Congressional Victory Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. William G. French, II <hr/> Mailing Address 217 S Ritter Ave <hr/> City Indianapolis State IN Zip Code 46219-7129 Purpose of Disbursement payroll Candidate Name <hr/> 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) ▼	Transaction ID: D242122 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 1 / 2 0 0 5
	Amount of Each Disbursement this Period 1779.68
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Troy D. Liggett <hr/> Mailing Address 1655 N Alabama St <hr/> City Indianapolis State IN Zip Code 46202-1516 Purpose of Disbursement house payroll Candidate Name <hr/> 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) ▼	Transaction ID: D239803 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 7 / 2 0 0 5
	Amount of Each Disbursement this Period 1678.86
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Troy D. Liggett <hr/> Mailing Address 1655 N Alabama St <hr/> City Indianapolis State IN Zip Code 46202-1516 Purpose of Disbursement house payroll Candidate Name <hr/> 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) ▼	Transaction ID: D239804 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 1 / 2 0 0 5
	Amount of Each Disbursement this Period 1081.51
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

4540.05

**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)

PAGE 24 / 50

<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

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 Democratic Congressional Victory Committee

A.

Full Name (Last, First, Middle Initial)

Indiana Department of Revenue

Mailing Address 100 North Senate Ave

City Indianapolis State IN Zip Code 46204

Purpose of Disbursement  
payroll taxes

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Transaction ID: D5677

Date of Disbursement

/   /

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)

PAGE 25 / 50

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

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NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Internal Revenue Service	Transaction ID: D5581 Date of Disbursement
	Mailing Address Cincinnati Commerce Ctr	<input type="text" value="01"/> <input type="text" value="07"/> / <input type="text" value="2005"/>
	City Cincinnati State OH Zip Code 45999	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes	<input type="text" value="185.76"/>
	Candidate Name	Category/Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Ms. Molly E. Chavers	Transaction ID: D5569 Date of Disbursement
	Mailing Address 1487 Sierra Springs Dr.	<input type="text" value="01"/> <input type="text" value="07"/> / <input type="text" value="2005"/>
	City Indianapolis State IN Zip Code 46280	Amount of Each Disbursement this Period
	Purpose of Disbursement payroll	<input type="text" value="1635.35"/>
	Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Ms. Molly E. Chavers	Transaction ID: D5570 Date of Disbursement
	Mailing Address 1487 Sierra Springs Dr.	<input type="text" value="01"/> <input type="text" value="21"/> / <input type="text" value="2005"/>
	City Indianapolis State IN Zip Code 46280	Amount of Each Disbursement this Period
	Purpose of Disbursement payroll	<input type="text" value="1635.35"/>
	Candidate Name	Category/Type
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="3456.46"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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 26 / 50

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

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NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

A.	Full Name (Last, First, Middle Initial) Mr. Daniel J Parker	Transaction ID: D5571 Date of Disbursement 01 / 07 / 2005
	Mailing Address 7458 Rooses Way	Amount of Each Disbursement this Period 2497.81
	City Indianapolis State IN Zip Code 46217-5484	
	Purpose of Disbursement payroll Candidate Name	Category/Type
	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) ▼
B.	Full Name (Last, First, Middle Initial) Mr. Daniel J Parker	Transaction ID: D5572 Date of Disbursement 01 / 21 / 2005
	Mailing Address 7458 Rooses Way	Amount of Each Disbursement this Period 2497.81
	City Indianapolis State IN Zip Code 46217-5484	
	Purpose of Disbursement payroll Candidate Name	Category/Type
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	4995.62
<b>TOTAL</b> This Period (last page this line number only) .....	8452.08

**SCHEDULE F (FEC Form 3X)**  
**ITEMIZED COORDINATED EXPENDITURES MADE BY**  
**POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)**  
**ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE**  
**(2 U.S.C. §441a(d))** (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) Indiana Democratic Congressional Victory Committee		<input type="checkbox"/> Check if 24-hour notice	
Has your committee been designated to make coordinated expenditures by a political party committee? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		Full Name of Subordinate Committee Indiana Democratic Congressional Victory Committee	
If YES, name the designating committee:		Mailing Address One North Capitol Suite 200	
		City Indianapolis	State IN      ZIP Code 46204

Full Name (Last, First, Middle Initial) of Each Payee Ms. Brandi Bruns		Purpose of Expenditure payroll		
Mailing Address 6136 Burlington Ave				Category/Type
City Indianapolis		State IN	ZIP Code 46220-2410	
Name of Federal Candidate Supported Honorable Evan Bayh		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	Date MM / DD / YYYY 01 / 07 / 2005	
Aggregate General Election Expenditure for this Candidate ▶		Amount		598.45
<b>Transaction ID: D5578</b>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)		

Full Name (Last, First, Middle Initial) of Each Payee Indiana Department of Revenue		Purpose of Expenditure payroll taxes		
Mailing Address 100 North Senate Ave				Category/Type
City Indianapolis		State IN	ZIP Code 46204	
Name of Federal Candidate Supported Honorable Evan Bayh		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	Date MM / DD / YYYY 01 / 07 / 2005	
Aggregate General Election Expenditure for this Candidate ▶		Amount		40.88
<b>Transaction ID: D5580</b>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)		

SUBTOTAL of Expenditures This Page (optional) .....	639.33
TOTAL This Period (last page this line number only) .....	639.33

**METHOD OF ALLOCATION FOR:**

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

NAME OF COMMITTEE (In Full)

Indiana Democratic Congressional Victory Committee

USE ONLY ONE SECTION, A or B

**A. State and Local Party Committees**

**Fixed Percentage (select one)**

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

**B. Separate Segregated Funds and Nonconnected Committees**

**Flat Minimum Federal Percentage**

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

**or**

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

Federal.....  %

Nonfederal.....  %

This ratio applies to (check all that apply):

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

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

NAME OF COMMITTEE (In Full)  
 Indiana Democratic Congressional Victory Committee

NAME OF ACCOUNT Non-Federal	DATE OF RECEIPT M M / D D / Y Y Y Y 0 1 / 0 6 / 2 0 0 5	TOTAL AMOUNT TRANSFERRED 16914.06
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BREAKDOWN OF TRANSFER RECEIVED		
<b>i) Total Administrative</b> .....		16914.06 Transaction ID: T1788
<b>ii) Generic Voter Drive</b> .....		Transaction ID:
<b>iii) Exempt Activities</b> .....		Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)		
		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED	
<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred) .....	

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

NAME OF COMMITTEE (In Full)  
 Indiana Democratic Congressional Victory Committee

NAME OF ACCOUNT IDP Non-Federal	DATE OF RECEIPT M M / D D / Y Y Y Y 0 1 / 1 1 / 2 0 0 5	TOTAL AMOUNT TRANSFERRED 2579.36
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**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	2579.36	Transaction ID: T278
<b>ii) Generic Voter Drive</b> .....		Transaction ID:
<b>iii) Exempt Activities</b> .....		Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)		Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

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

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

NAME OF COMMITTEE (In Full)  
 Indiana Democratic Congressional Victory Committee

NAME OF ACCOUNT IDP Non-Federal	DATE OF RECEIPT M M / D D / Y Y Y Y 0 1 / 2 0 / 2 0 0 5	TOTAL AMOUNT TRANSFERRED 14620.23
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BREAKDOWN OF TRANSFER RECEIVED

<b>i) Total Administrative</b> .....	14620.23	Transaction ID: T279
<b>ii) Generic Voter Drive</b> .....		Transaction ID:
<b>iii) Exempt Activities</b> .....		Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

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

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

NAME OF COMMITTEE (In Full)  
 Indiana Democratic Congressional Victory Committee

NAME OF ACCOUNT IDP Non-Federal	DATE OF RECEIPT M M / D D / Y Y Y Y 0 1 / 1 9 / 2 0 0 5	TOTAL AMOUNT TRANSFERRED 13373.63
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BREAKDOWN OF TRANSFER RECEIVED		
<b>i) Total Administrative</b> .....		13373.63 Transaction ID: T280
<b>ii) Generic Voter Drive</b> .....		Transaction ID:
<b>iii) Exempt Activities</b> .....		Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED	
<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred) .....	

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

NAME OF COMMITTEE (In Full)  
 Indiana Democratic Congressional Victory Committee

NAME OF ACCOUNT IDP Non-Federal	DATE OF RECEIPT M M / D D / Y Y Y Y 0 1 / 1 0 / 2 0 0 5	TOTAL AMOUNT TRANSFERRED 2692.80
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BREAKDOWN OF TRANSFER RECEIVED		
<b>i) Total Administrative</b> .....		2692.80 Transaction ID: T281
<b>ii) Generic Voter Drive</b> .....		Transaction ID:
<b>iii) Exempt Activities</b> .....		Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)		
		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED	
<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred) .....	

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

NAME OF COMMITTEE (In Full)  
 Indiana Democratic Congressional Victory Committee

NAME OF ACCOUNT IDP Non-Federal	DATE OF RECEIPT M M / D D / Y Y Y Y 0 1 / 1 3 / 2 0 0 5	TOTAL AMOUNT TRANSFERRED 894.11
------------------------------------	---	------------------------------------

BREAKDOWN OF TRANSFER RECEIVED		894.11
i) Total Administrative .....		Transaction ID: T282
ii) Generic Voter Drive .....		Transaction ID:
iii) Exempt Activities .....		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED	
TOTAL This Period (Administrative) .....	
TOTAL This Period (Generic Voter Drive) .....	
TOTAL This Period (Exempt Activities) .....	
TOTAL This Period (Direct Fundraising) .....	
TOTAL This Period (Direct Candidate Support) .....	
TOTAL This Period (Public Communications Referring Only to Party) .....	
TOTAL This Period (Total Amount Transferred) .....	

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

NAME OF COMMITTEE (In Full)  
 Indiana Democratic Congressional Victory Committee

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
IDP Non-Federal	M M / D D / Y Y Y Y 0 1 / 2 4 / 2 0 0 5	2796.99

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....		2796.99	Transaction ID: T283
<b>ii) Generic Voter Drive</b> .....			Transaction ID:
<b>iii) Exempt Activities</b> .....			Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)			
a) _____			Transaction ID:
b) _____			Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....			
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)			
a) _____			Transaction ID:
b) _____			Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....			
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)			Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

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

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

NAME OF COMMITTEE (In Full)  
 Indiana Democratic Congressional Victory Committee

NAME OF ACCOUNT IDP Non-Federal	DATE OF RECEIPT M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 5	TOTAL AMOUNT TRANSFERRED 316.00
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**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	Transaction ID: T284	316.00
<b>ii) Generic Voter Drive</b> .....	Transaction ID:	
<b>iii) Exempt Activities</b> .....	Transaction ID:	
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____	Transaction ID:	
b) _____	Transaction ID:	
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____	Transaction ID:	
b) _____	Transaction ID:	
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)		
	Transaction ID:	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	54187.18
<b>TOTAL</b> This Period (Generic Voter Drive) .....	0.00
<b>TOTAL</b> This Period (Exempt Activities) .....	0.00
<b>TOTAL</b> This Period (Direct Fundraising) .....	0.00
<b>TOTAL</b> This Period (Direct Candidate Support) .....	0.00
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	0.00
<b>TOTAL</b> This Period (Total Amount Transferred) .....	54187.18

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Denison Parking, INC.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 36 S Pennsylvania St Ste 200			Allocated Activity or Event Year-To-Date 27079.00		
City Indianapolis	State IN	Zip Code 46204-3627	Date <input type="text" value="01"/> / <input type="text" value="23"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: parking			Transaction ID: D5564		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
277.20		1042.80		1320.00

<b>B. Full Name (Last, First, Middle Initial)</b> United States Postal Service			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 125 W South St Room E-296			Allocated Activity or Event Year-To-Date 27079.00		
City Indianapolis	State IN	Zip Code 46206	Date <input type="text" value="01"/> / <input type="text" value="11"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: postage renewal			Transaction ID: D5545		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
31.50		118.50		150.00

<b>C. Full Name (Last, First, Middle Initial)</b> United States Postal Service			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 125 W South St Room E-296			Allocated Activity or Event Year-To-Date 27079.00		
City Indianapolis	State IN	Zip Code 46206	Date <input type="text" value="01"/> / <input type="text" value="19"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: postage			Transaction ID: D5560		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
475.31		1788.07		2263.38

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
784.01		2949.37		3733.38

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Verizon Wireless			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 790406			Allocated Activity or Event Year-To-Date 27079.00	
City Saint Louis	State MO	Zip Code 63179-0406	Date M M / D D / Y Y Y Y 0 1 / 1 9 / 2 0 0 5	
Purpose of Disbursement: phones			Transaction ID: D5552	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
254.05		955.70		1209.75

<b>B. Full Name (Last, First, Middle Initial)</b> Skyline Club			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1 American Sq Fl 36			Allocated Activity or Event Year-To-Date 27079.00	
City Indianapolis	State IN	Zip Code 46282	Date M M / D D / Y Y Y Y 0 1 / 2 3 / 2 0 0 5	
Purpose of Disbursement: dues			Transaction ID: D5566	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
28.99		109.06		138.05

<b>C. Full Name (Last, First, Middle Initial)</b> Time Warner Cable			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 741855			Allocated Activity or Event Year-To-Date 27079.00	
City Cincinnati	State OH	Zip Code 45274-1855	Date M M / D D / Y Y Y Y 0 1 / 1 1 / 2 0 0 5	
Purpose of Disbursement: cable			Transaction ID: D5543	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.29		57.51		72.80

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
298.33		1122.27		1420.60

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Gibson Insurance Agency, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 610			Allocated Activity or Event Year-To-Date 27079.00		
City Plymouth	State IN	Zip Code 46563-0610	Date <input type="text" value="01"/> / <input type="text" value="11"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: liability insurance			Transaction ID: D5531		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.10		86.90		110.00

<b>B. Full Name (Last, First, Middle Initial)</b> Gibson Insurance Agency, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 610			Allocated Activity or Event Year-To-Date 27079.00		
City Plymouth	State IN	Zip Code 46563-0610	Date <input type="text" value="01"/> / <input type="text" value="19"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: insurance			Transaction ID: D5556		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
340.20		1279.80		1620.00

<b>C. Full Name (Last, First, Middle Initial)</b> Gibson Insurance Agency, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 610			Allocated Activity or Event Year-To-Date 27079.00		
City Plymouth	State IN	Zip Code 46563-0610	Date <input type="text" value="01"/> / <input type="text" value="23"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: liability insurance			Transaction ID: D5561		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
144.27		542.73		687.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
507.57		1909.43		2417.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Storage USA			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 501 Fulton St			Allocated Activity or Event Year-To-Date 27079.00																						
City Indianapolis	State IN	Zip Code 46202-3510	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>1</td><td>/</td><td>1</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	1	9	/	2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y																
0	1	/	1	9	/	2	0	0	5																
Purpose of Disbursement: storage			Transaction ID: D5554																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
46.41		174.58		220.99

<b>B. Full Name (Last, First, Middle Initial)</b> Duke Realty Corporation			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 75 Remittance Dr   Dept 3205			Allocated Activity or Event Year-To-Date 27079.00																						
City Chicago	State IL	Zip Code 60675-3205	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>1</td><td>/</td><td>1</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	1	9	/	2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y																
0	1	/	1	9	/	2	0	0	5																
Purpose of Disbursement: rent			Transaction ID: D5555																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2684.71		10099.64		12784.35

<b>C. Full Name (Last, First, Middle Initial)</b> Dell Account			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 9020			Allocated Activity or Event Year-To-Date 27079.00																						
City Des Moines	State IA	Zip Code 50368-9020	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>1</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	1	1	/	2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y																
0	1	/	1	1	/	2	0	0	5																
Purpose of Disbursement: computer supplies			Transaction ID: D5534																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
58.68		220.75		279.43

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2789.80		10494.97		13284.77

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Dell Account			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 9020			Allocated Activity or Event Year-To-Date 27079.00		
City Des Moines	State IA	Zip Code 50368-9020	Date <input type="text" value="01"/> / <input type="text" value="19"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: computers			Transaction ID: D5549		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
293.38		1103.67		1397.05

<b>B. Full Name (Last, First, Middle Initial)</b> LexisNexis			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 2314			Allocated Activity or Event Year-To-Date 27079.00		
City Carol Stream	State IL	Zip Code 60132-0001	Date <input type="text" value="01"/> / <input type="text" value="19"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: legal service			Transaction ID: D5553		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
83.37		313.63		397.00

<b>C. Full Name (Last, First, Middle Initial)</b> AquaPerfect, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 5684 W 74th St			Allocated Activity or Event Year-To-Date 27079.00		
City Indianapolis	State IN	Zip Code 46278-1752	Date <input type="text" value="01"/> / <input type="text" value="19"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: water			Transaction ID: D5550		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
38.43		144.57		183.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
415.18		1561.87		1977.05

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

<b>A. Full Name (Last, First, Middle Initial)</b> SBC Long Distance			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 660688			Allocated Activity or Event Year-To-Date 27079.00																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>1</td><td>/</td><td>1</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table> Transaction ID: D5558			M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	1	9	/	2	0	0	5
M	M	/				D	D	/	Y	Y	Y	Y													
0	1	/	1	9	/	2	0	0	5																
Dallas	TX	75266-0688																							
Purpose of Disbursement: phones			Category/ Type																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.01		56.48		71.49

<b>B. Full Name (Last, First, Middle Initial)</b> SBC Long Distance			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 660688			Allocated Activity or Event Year-To-Date 27079.00																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>1</td><td>/</td><td>2</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table> Transaction ID: D5568			M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	2	3	/	2	0	0	5
M	M	/				D	D	/	Y	Y	Y	Y													
0	1	/	2	3	/	2	0	0	5																
Dallas	TX	75266-0688																							
Purpose of Disbursement: phones			Category/ Type																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.78		25.51		32.29

<b>C. Full Name (Last, First, Middle Initial)</b> Cinergy			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 740399			Allocated Activity or Event Year-To-Date 27079.00																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>1</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table> Transaction ID: D5538			M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	1	1	/	2	0	0	5
M	M	/				D	D	/	Y	Y	Y	Y													
0	1	/	1	1	/	2	0	0	5																
Cincinnati	OH	45274-0399																							
Purpose of Disbursement: utilities			Category/ Type																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.04		18.95		23.99

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
26.83		100.94		127.77

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

<b>A. Full Name (Last, First, Middle Initial)</b> SBC Ameritech			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Bill Payment Ctr			Allocated Activity or Event Year-To-Date 27079.00		
City	State	Zip Code	Category/Type		
Chicago	IL	60663-0001			
Purpose of Disbursement: phones					
Activity or Event Identifier: Administrative			Date <input type="text" value="01"/> / <input type="text" value="11"/> / <input type="text" value="2005"/> <b>Transaction ID:</b> D5533		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.99		30.07		38.06

<b>B. Full Name (Last, First, Middle Initial)</b> SBC Ameritech			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Bill Payment Ctr			Allocated Activity or Event Year-To-Date 27079.00		
City	State	Zip Code	Category/Type		
Chicago	IL	60663-0001			
Purpose of Disbursement: phones					
Activity or Event Identifier: Administrative			Date <input type="text" value="01"/> / <input type="text" value="19"/> / <input type="text" value="2005"/> <b>Transaction ID:</b> D5551		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
29.02		109.15		138.17

<b>C. Full Name (Last, First, Middle Initial)</b> SBC Capital Services			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 13160 Collection Center Dr			Allocated Activity or Event Year-To-Date 27079.00		
City	State	Zip Code	Category/Type		
Chicago	IL	60693-0131			
Purpose of Disbursement: phones					
Activity or Event Identifier: Administrative			Date <input type="text" value="01"/> / <input type="text" value="19"/> / <input type="text" value="2005"/> <b>Transaction ID:</b> D5557		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
113.76		427.95		541.71

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
150.77		567.17		717.94

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Pitney Bowes Purchase Power			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 856042			Allocated Activity or Event Year-To-Date 27079.00																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>1</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table> Transaction ID: D5532			M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	1	1	/	2	0	0	5
M	M	/				D	D	/	Y	Y	Y	Y													
0	1	/	1	1	/	2	0	0	5																
Louisville	KY	40285-6042																							
Purpose of Disbursement: postage meter			Category/ Type																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
423.57		1593.42		2016.99

<b>B. Full Name (Last, First, Middle Initial)</b> The Indiana Labor Law Poster Service			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 5652 Georgetown Road #102			Allocated Activity or Event Year-To-Date 27079.00																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>1</td><td>/</td><td>1</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table> Transaction ID: D5548			M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	1	9	/	2	0	0	5
M	M	/				D	D	/	Y	Y	Y	Y													
0	1	/	1	9	/	2	0	0	5																
Indianapolis	IN	46254																							
Purpose of Disbursement: labor law poster			Category/ Type																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.21		4.54		5.75

<b>C. Full Name (Last, First, Middle Initial)</b> NADALESS Datasource			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 524 Old Apex Rd			Allocated Activity or Event Year-To-Date 27079.00																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>1</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table> Transaction ID: D5535			M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	1	1	/	2	0	0	5
M	M	/				D	D	/	Y	Y	Y	Y													
0	1	/	1	1	/	2	0	0	5																
Cary	NC	27511-6708																							
Purpose of Disbursement: office			Category/ Type																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
41.79		157.21		199.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
466.57		1755.17		2221.74

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

<b>A. Full Name (Last, First, Middle Initial)</b> SPRINKLE'S FLOWER SHOP			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 183			Allocated Activity or Event Year-To-Date 27079.00		
City English	State IN	Zip Code 47118-0183	Date <input type="text" value="01"/> / <input type="text" value="23"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: flowers			Transaction ID: D5563		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
28.62		50.88		79.50

<b>B. Full Name (Last, First, Middle Initial)</b> Indiana Herald			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 88449			Allocated Activity or Event Year-To-Date 27079.00		
City Indianapolis	State IN	Zip Code 46208-0449	Date <input type="text" value="01"/> / <input type="text" value="23"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: subscription			Transaction ID: D5567		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.67		21.33		27.00

<b>C. Full Name (Last, First, Middle Initial)</b> DHL Express Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1200 S Pine Island Rd			Allocated Activity or Event Year-To-Date 27079.00		
City Plantation	State FL	Zip Code 33324	Date <input type="text" value="01"/> / <input type="text" value="11"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: delivery service			Transaction ID: D5537		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.07		22.83		28.90

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
40.36		95.04		135.40

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

<b>A. Full Name (Last, First, Middle Initial)</b> DHL Express Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1200 S Pine Island Rd			Allocated Activity or Event Year-To-Date 27079.00		
City	State	Zip Code	Category/ Type		
Plantation	FL	33324			
Purpose of Disbursement: delivery service			Date <input type="text" value="01"/> / <input type="text" value="19"/> / <input type="text" value="2005"/>		
Activity or Event Identifier: Administrative			Transaction ID: D5559		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.37		50.31		63.68

<b>B. Full Name (Last, First, Middle Initial)</b> Provident Bank			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 1844			Allocated Activity or Event Year-To-Date 27079.00		
City	State	Zip Code	Category/ Type		
Cincinnati	OH	45274-0001			
Purpose of Disbursement: credit card payment			Date <input type="text" value="01"/> / <input type="text" value="11"/> / <input type="text" value="2005"/>		
Activity or Event Identifier: Administrative			Transaction ID: D5539		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.51		62.11		78.62

<b>C. Full Name (Last, First, Middle Initial)</b> Fortis Insurance Company			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 501 W Michigan St			Allocated Activity or Event Year-To-Date 27079.00		
City	State	Zip Code	Category/ Type		
Milwaukee	WI	53203-2706			
Purpose of Disbursement: health insurance			Date <input type="text" value="01"/> / <input type="text" value="11"/> / <input type="text" value="2005"/>		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>			Transaction ID: D5573		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
28.30		50.32		78.62

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
29.88		112.42		142.30

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Provident Bank			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 1844			Allocated Activity or Event Year-To-Date 27079.00	
City Cincinnati	State OH	Zip Code 45274-0001	Date <input type="text" value="01"/> / <input type="text" value="11"/> / <input type="text" value="2005"/>	
Purpose of Disbursement: credit card payment			Transaction ID: D5540	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
59.60		224.20		283.80

<b>B. Full Name (Last, First, Middle Initial)</b> Westin Hotel			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 50 S Capitol Ave			Allocated Activity or Event Year-To-Date 27079.00	
City Indianapolis	State IN	Zip Code 46204-3406	Date <input type="text" value="01"/> / <input type="text" value="11"/> / <input type="text" value="2005"/>	
Purpose of Disbursement: travel			Transaction ID: D5574	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
102.17		181.63		283.80

<b>C. Full Name (Last, First, Middle Initial)</b> Provident Bank			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 1844			Allocated Activity or Event Year-To-Date 27079.00	
City Cincinnati	State OH	Zip Code 45274-0001	Date <input type="text" value="01"/> / <input type="text" value="11"/> / <input type="text" value="2005"/>	
Purpose of Disbursement: credit card payment			Transaction ID: D5541	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.52		47.12		59.64

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
72.12		271.32		343.44

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Provident Bank			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address PO Box 1844			Allocated Activity or Event Year-To-Date 27079.00																		
City Cincinnati	State OH	Zip Code 45274-0001	Date <table border="1"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>1</td></tr></table> / <table border="1"><tr><td>D</td><td>D</td></tr><tr><td>1</td><td>1</td></tr></table> / <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>			M	M	0	1	D	D	1	1	Y	Y	Y	Y	2	0	0	5
M	M																				
0	1																				
D	D																				
1	1																				
Y	Y	Y	Y																		
2	0	0	5																		
Purpose of Disbursement: finance charge			Transaction ID: D5575																		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>																					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.47		38.17		59.64

<b>B. Full Name (Last, First, Middle Initial)</b> Provident Bank			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address PO Box 1844			Allocated Activity or Event Year-To-Date 27079.00																		
City Cincinnati	State OH	Zip Code 45274-0001	Date <table border="1"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>1</td></tr></table> / <table border="1"><tr><td>D</td><td>D</td></tr><tr><td>1</td><td>1</td></tr></table> / <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>			M	M	0	1	D	D	1	1	Y	Y	Y	Y	2	0	0	5
M	M																				
0	1																				
D	D																				
1	1																				
Y	Y	Y	Y																		
2	0	0	5																		
Purpose of Disbursement: credit card payment			Transaction ID: D5542																		
Activity or Event Identifier: Administrative																					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.19		15.76		19.95

<b>C. Full Name (Last, First, Middle Initial)</b> dreamhost			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address PO Box 5479			Allocated Activity or Event Year-To-Date 27079.00																		
City Huntington Park	State CA	Zip Code 90255-9479	Date <table border="1"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>1</td></tr></table> / <table border="1"><tr><td>D</td><td>D</td></tr><tr><td>1</td><td>1</td></tr></table> / <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>			M	M	0	1	D	D	1	1	Y	Y	Y	Y	2	0	0	5
M	M																				
0	1																				
D	D																				
1	1																				
Y	Y	Y	Y																		
2	0	0	5																		
Purpose of Disbursement: computer			Transaction ID: D5576																		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>																					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.18		12.77		19.95

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.19		15.76		19.95

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Democratic Congressional Victory Committee

**A. Full Name (Last, First, Middle Initial)**  
Provident Bank

Mailing Address  
PO Box 1844

City	State	Zip Code
Cincinnati	OH	45274-0001

Purpose of Disbursement:  
credit card payment

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative     Fundraising     Exempt  
 Voter Drive     Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
27079.00

Date 

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

  
**Transaction ID:** D5544

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
112.91		424.75		537.66

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

Mailing Address  
10105 E Washington St

City	State	Zip Code
Indianapolis	IN	46229-2625

Purpose of Disbursement:  
phones

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative     Fundraising     Exempt  
 Voter Drive     Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
27079.00

Date 

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

  
**Transaction ID:** D5577

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
193.56		344.10		537.66

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
112.91		424.75		537.66

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
5698.52		21380.48		27079.00

Form/Schedule: **F3XA**

Transaction ID:

Please note that the opening cash on hand is being amended due to a minor discrepancy discovered during a comprehensive audit of the Committee's activity. Please note that the Committee is amending all reports from January 1, 2005, to present as a result of a comprehensive and expansive internal audit in which several financial discrepancies and irregularities were discovered. Please note that from January 1, 2005, through mid 2007, the Committee did not correctly report allocable expenses. This issue has been corrected on these amendments and has been reported correctly since its discovery in 2007. This issue is related to ADR 342.