FEC FORM 3X NAME OF

2015 - 07 - 23 - 03 - 00012880

FE7AN014

REPORT OF RECEIPTS **AND DISBURSEMENTS**

For Other Than An Authorized Committee

RECEIVED FEC MAIL CENTER

on 15 July 23 All 9: 42

COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

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			III	- 		
P. FEC IDENTIFICATION NUMBER		ITY ▲		STATE A		ZIP CODE A
Cloo 405597		IS THIS REPORT	NEW (N)	or \square	AMENDED (A)	
I. TYPE OF REPORT (b) (Choose One)	Monthly Fe	b 20 (M2)	May 20	(M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election
	Due On:	ar 20 (M3)	Jun 20	(M6)	Sep 20 (M9)	Year Only) Dec 20 (M12) (Non-Election
(a) Quarterly Reports:		or 20 (M4)	Jul 20 ((M7)	Oct 20 (M10)	Year Only) Jan 31 (YE)
April 15 Quarterly Report (Q1)		Samult	had			
July 15 Quarterly Report (Q2)	PRE-Election	Council Council	ary (12P)	Same Same	eneral (12G)	Runoff (12R)
October 15	Report for the:	Conv	rention (12C)	L Sp	pecial (12S)	
Quarterly Report (Q3) January 31 Year-End Report (YE)	Elect	tion on	V 17 / 18 V 18		~~~	in the State of
Se July 21 Mid Yoar	(d) 30-Day					
Year Only) (MY)	POST-Election Report for the:	Gene	eral (30G)	Ru	unoff (30R)	Special (30S)
Termination Report (TER)	Elect	tion on] ' [] [in the State of
5. Covering Period O 1	0 1 20 1	5 th	rough	м м / D / 3	0 20	ì Ś
certify that I have examined this Repo			e and belief it	t is true, corre	ect and complet	е.
Type or Print Name of Treasurer	Jeff Brant	lez				
Signature of Treasurer	Berry			Date	07/2	1/20/5
NOTE: Submission of false, erroneous, o	r incomplete informat	ion may subject	the person sig	ning this Repo	ort to the penaltic	es of 52 U.S.C. § 30109.
Office Use						FORM 3X ev. 12/2004

2015 - 07 - 28 - 08 - 00012881

Г _	FEC Form 3X (Rev. 02/2003)	SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS	Page 2
\ -€	Indiana Chamber Con	gressions/ Action Commits	rec
R	eport Covering the Period: From:	0 1 ZO 15 To:	0,6 2018
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1,		5,41,1,9,0
	(b) Cash on Hand at Beginning of Reporting Period	5,41.1.9.0	
	(c) Total Receipts (from Line 19)		
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	5.4.1.1.60	5,4,1,1,9,0
— 7.	Total Disbursements (from Line 31)	Ø.	6
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	5,41,1,9,0	5,411.90
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	L. A. O. S. N. A.	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		
	This committee has qualified as a multi	candidate 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

	Trite or Type Committee Name Ludiqua Lugiqua	Congressional Action	Committee
R	eport Covering the Period: From:	1 0 1 2015 T	o: 6 6 70 2615
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From: (a) Individuals/Persons Other		
3.	• •		A
	Than Political Committees	α	
	(i) Itemized (use Schedule A)		Land Mark Mark Mark Mark Mark Mark Mark Mark
	(ii) Uniternized		Control of the second of the s
	(ii) Uniternized		America Committee Committee and Committee an
	(iii) TOTAL (add	0	A
	Lines 11(a)(i) and (ii)▶	and the solvent the solvent in so	
	(b) Political Party Committees		
	(c) Other Political Committees		
	(such as PACs)		
	(d) Total Contributions (add Lines	Secretary Comment Comment of the conference of District Comments of Comment of the conference of Comment of Comment of Comments of Comment	to and a series of the section of the section of the section of the section of
	11(a)(iii), (b), and (c)) (Carry		
	Totals to Line 33, page 5)		<i>(</i>
12.			
,	Party Committees		
	,		
13.	All Loans Received		\mathcal{O}
	•		handred and a decided the form
14	Loan Repayments Received		
	Offsets To Operating Expenditures		
	(Refunds, Rebates, etc.)		
	(Carry Totals to Line 37, page 5)		A)
16.	Refunds of Contributions Made	Baral March 12 March	land wheel the should all his book and book and the
	to Federal Candidates and Other		
	Political Committees		Ø
17.	Other Federal Receipts		termination of the state of the
	(Dividends, Interest, etc.)	α	
18.	Transfers from Non-Federal and Levin Funds		
	(a) Non-Federal Account	Leaved market and market the second second second	
	(from Schedule H3)	\mathcal{O}	Ø
	·		Boundaries American de Marcellon and American de Marcellon and American de Marcellon de Marcello
	(b) Levin Funds (from Schedule H5)	Ø	
	, (3) 201111 21120 (110111 2011210 110) 11111111	Consideration of Description and Samuel Samuel Samuel Samuel Samuel	Basedanahand Davidsand mad Bada at saad Barah
	(c) Total Transfers (add 18(a) and 18(b))	Complementary of the second se	
		· · · · · · · · · · · · · · · · · · ·	•
	:		·
19:	Total Receipts (add Lines 11(d),		
	12, 13, 14, 15, 16, 17, and 18(c))▶	\mathcal{O}	A
	•	towardsom toward the American Constitution of the Constitution of	Security and Backson Security Provides and made and Security
20.	Total Federal Receipts	In the state of th	
	(subtract Line, 18(c) from Line 19)▶	ϕ	Ø
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FEC Form 3X (Rev. 02/2003)

DETAILED SUMMARY PAGE

of Disbursements .

Page 4

COLUMN A COLUMN B II. Disbursements **Total This Period** Calendar Year-to-Date 21. Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4) (i) Federal Share (ii) Non-Federal Share..... (b) Other Federal Operating Expenditures (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶ 22. Transfers to Affiliated/Other Party Contributions to Federal Candidates/Committees and Other Political Committees 24. Independent Expenditures (use Schedule F)..... 26. Loan Repayments Made..... (b) Political Party Committees .. (c) Other Political Committees (such as PACs)..... (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..........▶ Other Disbursements 30. Federal Election Activity (52 U.S.C. § 30101(20)) (a) Allocated Federal Election Activity (from Schedule H6) (i) Federal Share (ii) "Levin" Share..... (b) Federal Election Activity Paid Entirely With Federal Funds (c) Total Federal Election Activity (add ... Lines 30(a)(i), 30(a)(ii) and 30(b))....▶ 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 32: Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

*** ** ursements

Page 5

111	. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans)		0
34.	(from Line 11(d), page 3) Total Contribution Refunds		
35.	(from Line 28(d)) Net Contributions (other than loans)		
36.	(subtract Line 34 from Line 33) Total Federal Operating Expenditures		
37	(add Line 21(a)(i) and Line 21(b))▶ Offsets to Operating Expenditures	Annual and hands and hands are seen as a second of the sec	
	(from Line 15, page 3)		and the section of th
38.	Net Operating Expenditures (subtract Line 37 from Line 36)		

SCHEDULE A (FEC Form 3X)

Use separate schedule(s)

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check	only or	ne)			1	τ-
11	a 🗌	11b	11c		12	
13		14	15		16	17

HEMIZED RECEIPTS	for each category of the Detailed Summary Page	11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and State or for commercial purposes, other than using the na	ments may not be sold or used by any perme and address of any political committee t	son for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)	Congressional Action Com	Mittee
Full Name (Last, First, Middle Initial) A. Mailing Address City	State Zip Code	Date of Receipt Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	Occupation	
	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial) B. Mailing Address City	State Zip Code	Date of Receipt
FEC ID number of contributing federal political committee.	C Coccupation	Amount of Each Receipt this Period
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial) C. Mailing Address City	State Zip Code	Date of Receipt Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	Occupation	Amount of Each Heedip tins rendu
Drimoni	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number only		

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SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER: PAGE OF
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	
	Detailed Summary Page	21b 27	22 23 24 25 26 28a 28b 28c 29 30b
		<u> </u>	1200 200 200 200
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NAME OF COMMITTEE (In Full)	and address of any pointed		
T	<i></i>	1/1	
Lantiana Mamber	Congressional	1/ction	1 Commisted
Full Name (Last, First, Middle Initial)	· · · · · · · · · · · · · · · · · · ·		
A.			Date of Disbursement
Mailing Address			MCHI / OBD / VUYSVUY
Mailing Address			Brand House Count Commission County
City	ate Zip Code		
Purpose of Disbursement	. !	भागक्रमका व्याप्	and the second second second
Candidate Name	į.,	eraturat i A	Amount of Each Disbursement this Period
Candidate Name		Category/	
Office Sought: House Disburseme	ent For	Туре	్ కల్లోకు కార్డు వేడుకు మెక్కిట్ కి కల్లోకట్ కాన్లో కట్టి కెట్
_	Primary General		
	Other (specify)		
State: District:		· .	
Full Name (Last, First, Middle Initial)			
В.			Date of Disbursement
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Mailing Address			had become harmed
City St	ate Zip Code		
	•		
Purpose of Disbursement	16	राम्य द्वाराम्य स्वत्रात्रात्	
Candidate Name	,	9 1 12 - 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Amount of Each Disbursement this Period
Candidate Name		Category/	<u> </u>
Office Sought: House Disburseme	ant For:	Туре	Freedom Kanada Caraban Banda Banda Ba
	Primary General		
	Other (specify)		•
State: District:			
Full Name (Last, First, Middle Initial)			
C.			Date of Disbursement
National Address	<u></u>	-	[B]
Mailing Address			Various Personal Personal const
City	ate Zip Code		
<u> </u>			
Purpose of Disbursement	17	-distribution	
Candidate Name	i.	المراق مسارة تسمر	Amount of Each Disbursement this Period
Candidate Name		Category/	Sometiment of the following market and the second s
Office Sought: House Disburseme	ent For:	Туре	V- จากโดยารักดาเมืองเราเลยาเหลืองเป็นเหลืองเป็นเหลืองเป็นเกล้า
	rimary General		
President	Other (specify)		
State: District:			
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SUBTOTAL of Disbursements This Page (optional)		····· >	hand han than the mathematic and market hand the state of
TOTAL This Period (last page this line number only)			i hand the free free distriction of the state of
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SCHEDULE C (FEC Form	n 3X)	
LOANS		Use separate schedule(s) PAGE OF for each category of the Detailed Summary Page FOR LINE 13 OF FORM 3X
NAME OF COMMITTEE (In Full)		
Indiana Lanber LOAN SOURCE Full Name (Las		ction Committee
Mailing Address	i, riisi, Middle Inidal)	Primary General Other (specify)
City	State ZIP	Code
Original Amount of Loan	· Cumulative Payment	t To Date Balance Outstanding at Close of This Peri
Date Incurred Date Incurred List All Endorsers or Guarantors		
Full Name (Last, First, Middle)	'	Name of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle)	nitial)	Name of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle I	nitial)	Name of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Guaranteed Gustanding:
4. Full Name (Last, First, Middle I	nitial)	Name of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page	(optional)	
TOTALS This Period (last page in thi	is line only)	The property of the state of
Carry outstanding balance only to 1	INE 3 Schedule D for this line	If no Schedule D. carry forward to appropriate line of Summany

SCHEDULE C-1 (FEC Form 3X) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for Information found on Page _____ of Schedule C

rede	eral Election Commission, Washington, D.C. 20463		·	
NA	ME OF COMMITTEE (In Full)		FEC	IDENTIFICATION NUMBER
	Indiana Chamber Congressional	Action Commisses	;C)	00405597
	ADING INSTITUTION (LENDER)	Amount of Loan		Interest Rate (APR)
Ful	Name			
		5 5	·	%
Ma	ling Address		M M	/ ''ë ' ë' ' ' ' ''ë ' ' ' ' ' ' ' ' ' '
		Date Incurred or Established		/ 5 5 6 5 / 4 4 · 4 · 4 · 4
City	State Zip Code	Date Due		1 . D . O . B . G . A . A . A . A
	A. Has loan been restructured? No Yes	If yes, date originally incurred	\$ 5	Continued of the second of the
.	B. If line of credit, Amount of this Draw:	Outstanding	•	والمحصورين والعصوبي مرامعها
	Amount of this Draw:		-23مرا- در ۵۰۰ مر	the straight will be settled the straight
	C. Are other parties secondarily liable for the debt incurred No Yes (Endorsers and guarantors mu	ed? est be reported on Schedule C.)		
	D. Are any of the following pledged as collateral for the le property, goods, negotiable instruments, certificates of stocks, accounts receivable, cash on deposit, or other	deposit, chattel papers,		value of this collateral?
-	No Yes If yes, specify:		ئلانىيىن بى.	المراجع وهيميس بالمهاب والمالية المالية المالية
			oes the le	nder have a perfected security
}	E. Are any future contributions or future receipts of intere			estimated value?
	collateral for the loan? No Yes If yes, s			CSUITIALOU VAIUE:
1			marine in the 195	tion is an a total and the second second and the second
	A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).	Location of account:	- 	
	Date account established:	Address:		
	٣٧٠ ١٧٠ ٢٧٠ ٢٧٠ . وأنه وآن ٢٠ يُوكِم الأستام المالية	City State Zine		
. }	Transport Scherosch in a colombianis	City, State, Zip:		
	F. If neither of the types of collateral described above was the loan amount, state the basis upon which this loan	s pledged for this loan, or if the an was made and the basis on which	nount pledon it assures	ged does not equal or exceed s repayment.
.	G. COMMITTEE TREASURER		DATE	
	Typed Name		•	7 15 8 5 15 7 5 8 7 17 9 7 7 8 19 1
. }	Signature			A CONDIGUES A CARLES AND
ľ	H. Attach a signed copy of the loan agreement.			
	TO BE SIGNED BY THE LENDING INSTITUTION: To the best of this institution's knowledge, the terminal ter	rms of the loan and other informat	ion regardi	ng the extension of the loan
.	are accurate as stated above. II. The loan was made on terms and conditions (inc similar extensions of credit to other borrowers of	cluding interest rate) no more favo	rable at the	e time than those imposed for
	III. This institution is aware of the requirement that a complied with the requirements set forth at 11 CF	loan must be made on a basis v		res repayment, and fias
	THORIZED REPRESENTATIVE	Ĭ	DATE	
	ped Name		W www.	/ = 6***********************************
Sig	gnature Till	е .	4.	/ ************************************

SCHEDULE D (FEC Form 3X)		(Use separate	PAGE OF
DEBTS AND OBLIGATIONS	schedule(s)	FOR LINE NUMBER:	
Excluding Loans		for each numbered line)	(check only one) 9
NAME OF, COMMITTEE (In Full)			
	1 1/1 .		
Sudiana Chamber Congresse		Tree	· · · · · · · · · · · · · · · · · · ·
A. Full Name (Last, First, Middle Initial) of Debtor	or Creditor.	Nature of D	ebt (Purpose):
·			
Mailing Address			
City State	Zip Code		
Out to Four Police Parisation This Porisat			·
Outstanding Balance Beginning This Period			
المنافعة والمنافعة والمناف			
Amount Incurred This Period	Payment This Period		g Balance at Close of This Period
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B. Full Name (Last, First, Middle Initial) of Debtor of	Creditor	Nature of De	ebt (Purpose):
Mailing Address	 		
······································	•	}	,
City State	Zip Code ,		
		L	
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C. Full Name (Last, First, Middle Initial) of Debtor o	r Creditor	Nature of De	bt (Purpose):
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Mailing Address			
City	State Zip Code		
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Outstanding Balance Beginning This Period		,	
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Amount Incurred This Period	Payment This Period		Balance at Close of This Period
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2) TOTALS This Period (last mass this lies number and		ij	Sanatakan demaka saharata - meneruka sa -
TOTALS This Period (last page this line number onl	y/	こうしょう しんごう シャット	Alamana and a state of material and a second
3) TOTAL OUTSTANDING LOANS from Schedule C (I	ast page only)		Millian Taran Taran Makaman and anak Silamah merek Taran Taran San anggan ini kangsahan pendangi pendanan kang
4) ADD 2) and 3) and carry forward to appropriate line	of Summary Page (last page only)	`` • • • • • • • • • • • • • • • • • • •	In referencias 250 of nanturality only - of

ITEMIZED INDEPENDENT EXPEN		·		PAGE OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER Y
	.4			there have has almosters for interestings
Indiana Chamber Cong	ressional Hetion	Committee	·	CO0405597
Check if 24-hour report 48-hou	·	•	ort filed	I on it is a second of the sec
Full Name of Payee				Date of Public Distribution/Dissemination
				Manager 1 September 1 September 1. A
Mailing Address				ಿದ್ದಾರ್ಪ್ಯವಾರ್ ಕ್ಲಿಪ್ರಾಪಾರ್ವಿಕ್ ಕ್ಲಿಪ್ರಾಪ್ ಕ್ಲಿಪ್ ಕ್ಲಿಪ್ರಾಪ್ ಕ್ಲಿಪ್ ಕ್ಟ್ರಿಪ್ ಕ್ಲಿಪ್ ಕ್ಲಿಪ್ ಕ್ಲಿಪ್ ಕ್ಲಿಪ್ ಕ್ಟ್ರ್ಟ್ ಕ್ಲಿಪ್ ಕ್ಟ್ರ್ಟ್ ಕ್ಟ್ಟ್ ಕ್ಟ್ರ್ಟ್ ಕ್ಟ್ರ್ಟ್ಟ್ ಕ್ಟ್ರ್ಟ್ ಕ್ಟ್ರ್ಟ್ ಕ್ಟ್ರ್ಟ್ ಕ್ಟ್ರ್ಟ್ ಕ್ಟ್ರ್ಟ್ ಕ್ಟ್ರ್ಟ್ ಕ್ಟ್ರ್ಟ್ ಕ್ಟ್ರ್ಟ್ ಕ್ಟ್ರ್ಟ್ ಕ್ಟ್ರ್ಟ್ಟ್ ಕ್ಟ್ರ್ಟ್ಟ್ ಕ್ಟ್ರ್ಟ್ಟ್ ಕ್ಟ್ರ್ಟ್ಟ್ ಕ
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City	State	Zip Code		น้ำ เกราะ น้ำสามารับสามารับสีเกาสุริการเหมือนเล่ามีของเครื่องและเลืองเปลี่ยว เครื่องเขาสั้ง
		-,		Date of Disbursement or Obligation
Purpose of Expenditure		Category/		Andread to the second s
Name of Federal Candidate		Support	Offic	e Sought: House District:
		Oppose	_	President Senate State:
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Per Election for Office Sought	kana demakandikan permuati and kad	in Localitation		Other (specify)
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Under penalty of perjury I certify that the with, or at the request or suggestion of, party committee) any political party com-	any candidate or authorized	reported herein were d committee or agent o	not ma	ade in cooperation, consultation, or concert r, or (if the reporting entity is not a political
			: :~{};};;;	Mary 1 September 1 September 1 September 1
Signature		Date	j	

SCHEDULE F (FEC Form 3X) ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)								
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE							OF (
(2	U.S.C. §441a(d))	neral Election)	FOR LINE 2	5 OF FORM 3X				
	NAME OF COMMITTEE (In Full) Indiana Chamber Congressional Action Committee							
co	as your committee been designated to ma ordinated expenditures by a political part YES NO YES, name the designating committee:	y committee?	Full Name of Sub-	ordinate Committee	: 			
	City State ZIP Code							
	·		····					
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	City	State	Zip Code			CONTRACT	. به جهر الم	
	Name of Federal Candidate Supported	Office Sought:	House Senate Presidential	State:	1		s angene grant grant is	
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SCHEDULE H1 (FEC Form 3X)

METHOD OF ALLOCATION FOR:

- ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS
- ALLOCATED 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)							
Indian (Gamber Congressional Herior 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)							
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 H2	(FEC	Form	3X)
ALLOCATION D	محامد		

NAME OF COMMITTEE (In Fall) Ludiana Langua Congressional Action Committee RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT. Methods of allocation: 1. FUNDRAISING activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised. II. Shared DIRECT CANDIDATE SUPPORT activities are allocated according to benefit expected to be derived where the federal proportion of disbursements is based on the benefit derived by federal candidates from tivity. For PACs Only: Direct candidates support includes public communications or voter drives that refer to federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses to the communication of the party.	ved, in the action both openses
RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT. Methods of allocation: 1. FUNDRAISING activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised. 11. Shared DIRECT CANDIDATE SUPPORT activities are allocated according to benefit expected to be derived where the federal proportion of disbursements is based on the benefit derived by federal candidates from tivity. For PACs Only: Direct candidate support includes public communications or voter drives that refer to federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses the property of th	ved, in the actor to both openses DERAL %
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SCHEDULE H3 (FEC Form 3X) TRANSFERS FROM NONFEDERAL ACCOUNTS FOR ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL MONFEDERAL ACTIVITY

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NAME OF COMMITTEE (In Full)	4 .		
Indian Chamber Con	1-1-55ional Action	a Connit	tee
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		·	Administrative Fundraising Exempt
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City	State Zip Coo	le	Public Comm (ref to party only) by PAC
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Mailing Address			
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SCHEDULE H5 (FEC Form 3X)

TRANSFERS OF LEVIN FUNDS RECEIVED FOR ALLOCATED FEDERAL ELECTION ACTIVITY

(To be used by State, District and Local Party Committees Only)

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2015 : 07 : 23 : 03 : 00012897

SCHEDULE H6 (FEC Form 3X) DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS FOR ALLOCATED FEDERAL ELECTION ACTIVITY

(To be used by State, District and Local Party Committees Only)

PAGI	Ε	(OF	1	
FOR	LINE	30a	OF	FORM	3X

NAME OF COMMITTEE (In Full)						
Indiana (hamber Congressional Action	Committee	<u>.</u>				
A. Full Name (Last, First, Middle Initial) / Full Organization Name		Type of Allocated Activity or Event:				
· ·		Voter Registration GOTV Voter ID Generic Campaign				
		Allocated Activity or Event Year-To-Date				
Mailing Address		Village description of the state of the second seco				
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		Voter Registration GOTV Voter ID Generic Campaign				
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Purpose of Disbursement	Category/ Type	Date Market State Company of State Compa				
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Purpose of Disbursement	Catagony	Date Samuelous Samuelous Sureline concentration				
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SUBTOTAL of Shared Federal and Levin Activity This Page						
FEDERAL SHARE + LEVIN SHAR		•				
FOTAL This Period (last page for each line only)(Federal share to 30(a)(i) and	Levin share to 3	(a)(ii))				
FEDERAL SHARE TOTAL AMOUNT						
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SCHEDULE L (FEC Form 3X) AGGREGATION PAGE: LEVIN FUNDS

NAM	IE OF COMMITTEE (In Full)		
21020	Ladiana Chambe	Congressional Action	Committee
INAIV	E OF ACCOUNT		
L		COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1.	RECEIPTS FROM PERSONS		
	(a) Itemized(Uso Schedule L-A)		5
	(555 52.602.5 2.14)		
	(b) Unitemized	e George Comment (1985) - Frank De Brown (1985) - Frank De Brown George Comment (1985) - Frank De Brown (1985) - Frank De Brown (1985)	ne en en en en en 1900 ett. Ett en 1900 ett en
	(c) Total	And the second of the second o	A confidence of the state of the confidence of t
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3.	TOTAL RECEIPTS	And the second s	Approximate the state of the st
	(Add Lines 1c and 2)		4.
4.	TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
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	(b) Voter ID	en Nasaran Indonesia kan kan pada ang panggalan sa	The second one of the second o
	(c) GOTV	7	
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	(d) Generic Campaign	kan kanan kanan katan sa manan kanan k Manan kanan ka	A comment of management of the property of the second property of the comment of
	(e) Total	the set on a market of the set of	See a transport of the desire that the second of the secon
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6.	TOTAL DISBURSEMENTS(Add Lines 4e and 5)	en e	The state of the s
			and the second s
7.	BEGINNING CASH ON HAND(for Column B, use cash as of January 1st)		at the contract of the section of th
	DECEMBE		the state of the s
8.	RECEIPTS(from Line 3)	Surveyed to the decree of the	Burgon Company State Office of Company of the
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9.	SUBTOTAL(Add Lines 7 and 8)	ing the second s	
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10.	DISBURSEMENTS (From Line 6)		The state of the s
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11.	ENDING CASH ON HAND(Subtract Line 10 From Line 9)		3 3
	(Secretary of Floridate of Management		

SCHEDULE L-A (FEC Form 3X) ITEMIZED RECEIPTS OF LEVIN FUNDS

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

	PAGE	ÒF	
FOR LINE NUMBER: (check only one)	1a]2

		Aggregation Page	(check only one)		
Ar	y information copied from such Reports and Statements may not be for commercial purposes, other than using the name and address	e sold or used by any pers of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) Judiqua Cambo Congressional Action Countries Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt				
Α.	Full Name (Last, First, Middle Initial) / Full Organization Name		Date of Receipt		
	Mailing Address		Variable Committee Committ		
		3:- 0:1-	Amount of Each Receipt this Period		
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SCHEDULE L-B (FEC Form 3X)

Use separate schedule(s)

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OF LEVIN FUNDS	for each category of the Aggregation Page	4a 4c 5
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Postmarked USPS First Class Mail	Date of Receipt
USPS Registered/Certified	Postmarked (R/C)
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Overnight Delivery Service (Specify): Fed Ex	Shipping Date 7/22/15
Next Business	Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	ceipt or Postmarked
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(3/2015)	DATE PREPARED