

RECEIVED

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FEC MAIL CENTER

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT

Example: If typing, type over the lines.

12FE4M5

CASS COUNTY REPUBLICAN CENTRAL COMMITTEE

ADDRESS (number and street)

PO Box 791

Check if different than previously reported. (ACC)

LOGANSPORT

IN

46947

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00020453

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 Year-End 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 (12S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the State of

XX

(d)

30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the State of

XX

5. Covering Period

07

01

2010

through

09

30

2010

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 Tony P. Key

Signature of Treasurer

Tony P Key

Date

10

15

2010

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

Office Use Only

FEC FORM 3X Rev. 12/2004

10030480901

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

CASS County Republican Central Committee

Report Covering the Period: From:

MM / DD / YYYY
07 / 01 / 2010

To:

MM / DD / YYYY
09 / 30 / 2010

**COLUMN A
This Period**

**COLUMN B
Calendar Year-to-Date**

6. (a) Cash on Hand January 1,	MM / DD / YYYY 2010	2653081
(b) Cash on Hand at Beginning of Reporting Period.....	3688895	
(c) Total Receipts (from Line 19)	158657	2231375
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	3847552	4884456
7. Total Disbursements (from Line 31).....	589038	1625942
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	3258514	3258514
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		



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

10030480902

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

CASS County Republican Central Committee

Report Covering the Period: From:

MM ' DD ' YYYY
07 ' 01 ' 2010

To:

MM ' DD ' YYYY
09 ' 30 ' 2010

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

8,000.00

(ii) Unitemized.....

1,586.57

1,431.375

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

1,586.57

2,231.375

(b) Political Party Committees.....

(c) Other Political Committees (such as PACs).....

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

1,586.57

2,231.375

12. Transfers From Affiliated/Other Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

17. Other Federal Receipts (Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

1,586.57

2,231.375

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

1,586.57

2,231.375

10030480903

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

10030480904

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures	598038	1625942
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	598038	1625942
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees		
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....		
26. Loan Repayments Made		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		
29. Other Disbursements		
30. Federal Election Activity (2 U.S.C. §431(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))..	598038	1625942
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)

Page 5

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)	1,586.57	2,231.375
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1,586.57	2,231.375
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	5,980.38	1,625.942
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)	5,980.38	1,625.942

10030480905

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 1 OF 1	
	<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 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)
CASS County Republican Central Committee

10030480906

A.

Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼ _____

Aggregate Year-to-Date ▼ _____

Date of Receipt: MM / DD / YYYY _____

Amount of Each Receipt this Period: _____

B.

Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼ _____

Aggregate Year-to-Date ▼ _____

Date of Receipt: MM / DD / YYYY _____

Amount of Each Receipt this Period: _____

C.

Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼ _____

Aggregate Year-to-Date ▼ _____

Date of Receipt: MM / DD / YYYY _____

Amount of Each Receipt this Period: _____

SUBTOTAL of Receipts This Page (optional).....▶ _____ **0.00**

TOTAL This Period (last page this line number only).....▶ _____ **0.00**

**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)

PAGE 1 OF 5

<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 type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CASS County Republican Central Committee

Full Name (Last, First, Middle Initial)

A.

KAY Weatherway

Mailing Address: *3012 Woodland Dr*

City: *LOGANSPOET* State: *IN* Zip Code: *46947*

Purpose of Disbursement: *Postage, etc*

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: *07* / *26* / *2010*

Amount of Each Disbursement this Period: *33.10*

Category/Type: *003*

B.

CASS CO Republican Holding Corp.

Mailing Address: *103 E Market St*

City: *LOGANSPOET* State: *IN* Zip Code: *46947*

Purpose of Disbursement: *RENT*

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: *07* / *26* / *2010*

Amount of Each Disbursement this Period: *15,000.00*

Category/Type: *001*

C.

Millers Market

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Purpose of Disbursement: *Corn booth*

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: *07* / *29* / *2010*

Amount of Each Disbursement this Period: *1,400.00*

Category/Type: *003*

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

1,673.10

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

10030480907

**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 2 OF 5

<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 type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CASS COUNTY Republican Central Committee

Full Name (Last, First, Middle Initial)

A. *POSTMASTER*

Mailing Address: *406 9th ST*

City: *LOGANSPORT* State: *IN* Zip Code: *46947*

Purpose of Disbursement: *Postage* Category/Type: *001*

Candidate Name: _____

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: _____ District: _____

Date of Disbursement: *08* / *09* / *2010*

Amount of Each Disbursement this Period: *1952*

B. *George Stebbins*

Mailing Address: *572 N CR 350 E*

City: *LOGANSPORT* State: *IN* Zip Code: *46947*

Purpose of Disbursement: *Corn Booth Supplies* Category/Type: *003*

Candidate Name: _____

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: _____ District: _____

Date of Disbursement: *08* / *18* / *2010*

Amount of Each Disbursement this Period: *21720*

C. *FRONTIER*

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Purpose of Disbursement: *Telephone* Category/Type: *001*

Candidate Name: _____

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: _____ District: _____

Date of Disbursement: *08* / *18* / *2010*

Amount of Each Disbursement this Period: *8469*

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

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

32141

10030480908

**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 3 OF 5					
<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 type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CASS County Republican Central Committee

A. *2nd District Central Committee*

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement: *DUES* Category/Type: *001*

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: *08 / 24 / 2010*

Amount of Each Disbursement this Period: *1,500.00*

B. *CASS Co. 4H Association*

Full Name (Last, First, Middle Initial)

Mailing Address: *CR 125 N*

City: *LOGANSPOUT* State: *IN* Zip Code: *46947*

Purpose of Disbursement: *Pancake Day Table* Category/Type: *003*

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: *09 / 10 / 2010*

Amount of Each Disbursement this Period: *85.00*

C. *Simple Solutions*

Full Name (Last, First, Middle Initial)

Mailing Address: *730 E. Broadway*

City: *LOGANSPOUT* State: *IN* Zip Code: *46947*

Purpose of Disbursement: *Computer Software repair* Category/Type: *001*

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: *09 / 17 / 2010*

Amount of Each Disbursement this Period: *210.49*

SUBTOTAL of Disbursements This Page (optional)..... *4,454.9*

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

10030480909

**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 4 OF 5

<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 type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CASS County Republican Central Committee

Full Name (Last, First, Middle Initial)

A. <i>FRONTIER</i>		Date of Disbursement
Mailing Address		<i>09' 17' 2010</i>
City	State	Zip Code
Purpose of Disbursement	Category/ Type	Amount of Each Disbursement this Period
<i>Telephone</i>		
Candidate Name		<i>16938</i>
Office Sought:	Disbursement For:	
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼	
<input type="checkbox"/> President		
State:	District:	

B. <i>CASS Co Republican Holding Corp</i>		Date of Disbursement
Mailing Address		<i>09' 17' 2010</i>
City	State	Zip Code
<i>LOGANSPORT</i>	<i>IN</i>	<i>46947</i>
Purpose of Disbursement	Category/ Type	Amount of Each Disbursement this Period
<i>RENT</i>		
Candidate Name		<i>100000</i>
Office Sought:	Disbursement For:	
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼	
<input type="checkbox"/> President		
State:	District:	

C. <i>Pharos Tribune</i>		Date of Disbursement
Mailing Address		<i>09' 20' 2010</i>
City	State	Zip Code
<i>LOGANSPORT</i>	<i>IN</i>	<i>46947</i>
Purpose of Disbursement	Category/ Type	Amount of Each Disbursement this Period
<i>CANDIDATE ADS</i>		
Candidate Name		<i>82100</i>
Office Sought:	Disbursement For:	
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼	
<input type="checkbox"/> President		
State:	District:	

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

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

199038

10030480910

**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 5 OF 5

21b 22 23 24 25 26
 27 28a 28b 28c 29 30b

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NAME OF COMMITTEE (In Full)

CASS County Republican Central Committee

Full Name (Last, First, Middle Initial)

A.

Mailing Address: *W SAL / MIX 102*
425 2ND ST

City: *LOGANSPORT* State: *IN* Zip Code: *46947*

Purpose of Disbursement: *CANDIDATE ADS* Category/Type: *004*

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: _____ District: _____

Date of Disbursement: *09 / 22 / 2010*

Amount of Each Disbursement this Period: *495.00*

B.

Mailing Address: *W H Z R*
425 2ND ST

City: *LOGANSPORT* State: *IN* Zip Code: *46947*

Purpose of Disbursement: *CANDIDATE ADS* Category/Type: *004*

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: _____ District: _____

Date of Disbursement: *09 / 22 / 2010*

Amount of Each Disbursement this Period: *495.00*

C.

Mailing Address: *Pharos Tribune*
517 E. Broadway

City: *LOGANSPORT* State: *IN* Zip Code: *46947*

Purpose of Disbursement: *CANDIDATE ADS* Category/Type: *004*

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: _____ District: _____

Date of Disbursement: *09 / 28 / 2010*

Amount of Each Disbursement this Period: *470.00*

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

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

1,460.00
5,890.38

10030480911

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

10030480912

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked <i>10/05/10</i>
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

<i>Amid</i>	<i>10/28/10</i>
PREPARER	DATE PREPARED