



**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Friends of Todd Young, Inc.**

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 01 / 2013 To: M M / D D / Y Y Y Y 12 / 31 / 2013

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	216348.9	1021484.92
(b) Total Contribution Refunds (from Line 20(d)) .....	0	3600
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	216348.9	1017884.92
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	76609.5	388253.71
(b) Total Offsets to Operating Expenditures (from Line 14).....	0	19.99
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	76609.5	388233.72
8. Cash on Hand at Close of Reporting Period (from Line 27).....	691979.62	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Friends of Todd Young, Inc.

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	122250	683610
(ii) Unitemized.....	6185	13105.2
(iii) TOTAL of contributions from individuals ▶	128435	696715.2
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	87913.9	324769.72
(d) The Candidate.....	0	0
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	216348.9	1021484.92
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0	0
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0	0
(b) All Other Loans.....	0	0
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0	0
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	0	19.99
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0	0
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	216348.9	1021504.91

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	76609.5	388253.71
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	0
(b) Of All Other Loans .....	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0	3600
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0	3600
21. OTHER DISBURSEMENTS .....	28000	51958
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	104609.5	443811.71

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	580240.22
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	216348.9
25. SUBTOTAL (add Line 23 and Line 24).....	796589.12
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	104609.5
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	691979.62

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 99
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Douglas A Bawel**

Mailing Address 1053 N Meridian Road

City Jasper State IN Zip Code 47546-8469

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

Name of Employer Jasper Engines & Transmissions Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2013**

**Transaction ID : A-CF17413**

Amount of Each Receipt this Period  
**500**

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

Mailing Address 2667 S Meridian Road

City Jasper State IN Zip Code 47546-3957

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

Name of Employer Jasper Engine Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2013**

**Transaction ID : A-CF17409**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Laura L Bierman**

Mailing Address 2710 French Creek Drive

City New Albany State IN Zip Code 47150-9140

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

Name of Employer Padgett Inc. Occupation Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 05 / 2013**

**Transaction ID : A-CF17385**

Amount of Each Receipt this Period  
**1500**

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

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

**2500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 99
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Brent Bilsland**

Mailing Address 4179 Golf Bag Lane

City State Zip Code  
Terre Haute IN 47802-8148

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

Name of Employer Occupation  
Sunrise Coal, LLC President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 23 / 2013**

**Transaction ID : A-CF17478**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Terie C. Blankenbaker**

Mailing Address 5102 Charbdin Court

City State Zip Code  
Louisville KY 40207-1684

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 31 / 2013**

**Transaction ID : A-CF17729**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Felson Bowman**

Mailing Address 3251 S State Road 135

City State Zip Code  
Greenwood IN 46143-9612

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

Name of Employer Occupation  
Solar Sources Inc CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5200**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 08 / 2013**

**Transaction ID : A-CF17448**

Amount of Each Receipt this Period  
**2600**

Reattribution/Redesignation requested

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

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

**3850.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 99
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Felson Bowman**

Mailing Address 3251 S State Road 135

City Greenwood State IN Zip Code 46143-9612

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

Name of Employer: Solar Sources Inc Occupation: CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **5200**

Date of Receipt: **12 / 27 / 2013**

**Transaction ID : A-MCNF6392**

Amount of Each Receipt this Period: **-2600**

Redesignation from primary

**[MEMO ITEM]**

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

Mailing Address 3251 S State Road 135

City Greenwood State IN Zip Code 46143-9612

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

Name of Employer: Solar Sources Inc Occupation: CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **5200**

Date of Receipt: **12 / 27 / 2013**

**Transaction ID : A-MCNF6393**

Amount of Each Receipt this Period: **2600**

Redesignation to general

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Fred A Bowman**

Mailing Address 5669 Banta Road

City Martinsville State IN Zip Code 46151-6949

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

Name of Employer: Solar Sources Occupation: Salesman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **2600**

Date of Receipt: **11 / 08 / 2013**

**Transaction ID : A-CF17435**

Amount of Each Receipt this Period: **2600**

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

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

**2600.00**

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

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

FOR LINE NUMBER: PAGE 8 OF 99  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**David W. Bricker**

Mailing Address 214 Hawthorne Drive

City Carmel State IN Zip Code 46033-1911

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

Name of Employer Solar Sources Occupation Accountant

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 08 / 2013

**Transaction ID : A-CF17527**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Candice D. Brun**

Mailing Address 2631 Lake Crossing Drive

City Greenwood State IN Zip Code 46143-9341

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

Name of Employer Solar Sources Occupation Office Manager

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 08 / 2013

**Transaction ID : A-CF17437**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Steven E. Bryant**

Mailing Address 4320 W Zenith Drive

City Bloomington State IN Zip Code 47404-7401

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

Name of Employer Ivy Tech Community College Occupation Executive Director, Cook Center

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : A-CF17667**

Amount of Each Receipt this Period  
**500**

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

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

**2500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 99
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**David F Byers Jr**

Mailing Address 4233 Old Brook Trail

City State Zip Code  
Mountain Brk AL 35243-1736

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

Name of Employer Occupation  
Capital Strategies Group Managing Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 31 2013

**Transaction ID : A-CF17734**

Amount of Each Receipt this Period  
**2000**

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

Mailing Address 7960 N Pennsylvania Street

City State Zip Code  
Indianapolis IN 46240-2533

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

Name of Employer Occupation  
Underwriters Surety, Inc President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 12 2013

**Transaction ID : A-CF17618**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Nick Carter**

Mailing Address 1518 Kentucky Avenue

City State Zip Code  
Ashland KY 41102-4555

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

Name of Employer Occupation  
Natural Resource Professionals LLC Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1500**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 08 2013

**Transaction ID : A-CF17444**

Amount of Each Receipt this Period  
**500**

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

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

**3500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 99
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**William Cassidy**

Mailing Address 2507 W Prospect Road

City Tampa State FL Zip Code 33629-5355

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

Name of Employer AXA Advisors, LLC d/b/a Cassidy Occupation Life Insurance

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 30 / 2013

**Transaction ID : A-CF17715**

Amount of Each Receipt this Period  
**750**

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

Mailing Address 601 President Ford Lane

City Alexandria State VA Zip Code 22302-3033

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

Name of Employer Fierce, Isakowitz Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 30 / 2013

**Transaction ID : A-CF17710**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**John W. Clark**

Mailing Address 8013 S Shady Side Drive

City Bloomington State IN Zip Code 47401-8973

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

Name of Employer Indiana University Occupation Adjunct Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 13 / 2013

**Transaction ID : A-CF17609**

Amount of Each Receipt this Period  
**500**

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

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

**1750.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 99
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Anne Coates**

Mailing Address 998 N 900 W

City Lexington State IN Zip Code 47138-7957

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

Name of Employer American Plastic Molding Occupation Manufacturing Mgmt

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 13 / 2013

**Transaction ID : A-CF17592**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Carl I. Cohen**

Mailing Address 2470 Deborah Drive

City Beachwood State OH Zip Code 44122-1602

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

Name of Employer KJB, Inc. Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 06 / 2013

**Transaction ID : A-CF17456**

Amount of Each Receipt this Period  
**1300**

**C.** Full Name (Last, First, Middle Initial)  
**Carl I. Cohen**

Mailing Address 2470 Deborah Drive

City Beachwood State OH Zip Code 44122-1602

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

Name of Employer KJB, Inc. Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 21 / 2013

**Transaction ID : A-CF17668**

Amount of Each Receipt this Period  
**1100**

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

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

**3400.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 99
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Evan L Cox**

Mailing Address 10901 W State Road 56

City French Lick State IN Zip Code 47432-7910

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

Name of Employer Self-Employed Occupation Farmer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 21 / 2013

**Transaction ID : A-CF17655**

Amount of Each Receipt this Period  
**500**

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

Mailing Address 501 Broadway

City Point Pleasant Beach State NJ Zip Code 08742-2558

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

Name of Employer KB Financial Partners Occupation Life Insurance

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 14 / 2013

**Transaction ID : A-CF17474**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**William Damora**

Mailing Address 501 Broadway

City Point Pleasant Beach State NJ Zip Code 08742-2558

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

Name of Employer KB Financial Partners Occupation Life Insurance

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : A-CF17708**

Amount of Each Receipt this Period  
**1000**

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

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

**2500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 99
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Scott A Daum**

Mailing Address 1700 Telegraph Road

City Lake Forest State IL Zip Code 60045-3738

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

Name of Employer Tricor Pacific Capital Occupation Investments

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 21 / 2013

**Transaction ID : A-CF17666**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Gregg C. Davis**

Mailing Address 2415 Damsel Katie Drive

City Lewisville State TX Zip Code 75056-5800

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

Name of Employer Thompson & Knight LLP Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 29 / 2013

**Transaction ID : A-CF17682**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**James E. Dora Sr.**

Mailing Address 5121 Green Braes East Drive

City Indianapolis State IN Zip Code 46234-2915

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

Name of Employer Self-Employed Occupation Hotel Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 21 / 2013

**Transaction ID : A-CF17627**

Amount of Each Receipt this Period  
**2500**

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

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

**3250.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 99
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Virginia A Emerson**

Mailing Address 5835 Graham Court

City Indianapolis State IN Zip Code 46250-1848

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : A-CF17731**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Robert J. Ewbank**

Mailing Address 114 W High Street # 4200

City Lawrenceburg State IN Zip Code 47025-1908

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

Name of Employer Information Requested Occupation Information Requested

Ewbank & Kramer Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 29 / 2013

**Transaction ID : A-CF17690**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Sherry A Fabina-Abney**

Mailing Address 4960 W Road 150 N

City Bargersville State IN Zip Code 46106-9433

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 29 / 2013

**Transaction ID : A-CF17676**

Amount of Each Receipt this Period  
**250**

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

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

**1000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 99
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Fred M Fehsenfeld Sr.**

Mailing Address 149 Willowgate Lane

City Indianapolis State IN Zip Code 46260-1433

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

Name of Employer The Heritage Group Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2013

**Transaction ID : A-CF17415**

Amount of Each Receipt this Period  
**2600**

**B.** Full Name (Last, First, Middle Initial)  
**James C Fehsenfeld**

Mailing Address 8001 Spring Mill Road

City Indianapolis State IN Zip Code 46260-2901

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

Name of Employer Heritage Group Occupation Sales

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 23 / 2013

**Transaction ID : A-CF17486**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Shane David Feiman**

Mailing Address 3200 E Flora Place

City Denver State CO Zip Code 80210-6920

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

Name of Employer Assured Equity Management Co Occupation Life Insurance & Benefit Sales

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 08 / 2013

**Transaction ID : A-CF17522**

Amount of Each Receipt this Period  
**500**

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

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

**4100.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 99
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Craig E. Fenneman**

Mailing Address 2902 E Morgan Street

City Martinsville State IN Zip Code 46151-8043

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

Name of Employer Southern Bells, Inc. Occupation Restaurant Operator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **7600**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 13 / 2013

**Transaction ID : A-CF17594**

Amount of Each Receipt this Period  
 5000

Reattribution/Redesignation requested

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

Mailing Address 205 Summers Drive

City Alexandria State VA Zip Code 22301-2444

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

Name of Employer Thorn Run Partners Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 18 / 2013

**Transaction ID : A-CF17501**

Amount of Each Receipt this Period  
 500

**C.** Full Name (Last, First, Middle Initial)  
**Don Ray Foertsch**

Mailing Address 10049 E County Road 1000 N

City Lamar State IN Zip Code 47550-7344

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

Name of Employer Self-Employed Occupation Lamar Management Services

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 21 / 2013

**Transaction ID : A-CF17621**

Amount of Each Receipt this Period  
 2600

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

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

8100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 99
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Gregory L. Gibson**

Mailing Address 3200 E Haythorne Avenue

City State Zip Code  
Terre Haute IN 47805-2108

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

Name of Employer Occupation  
Rectec Corp Waste Management Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 31 / 2013

**Transaction ID : A-CF17732**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Peter A. Gilbertson**

Mailing Address 75 Dellwood Avenue

City State Zip Code  
Saint Paul MN 55110-1415

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

Name of Employer Occupation  
Anacostia & Pacific Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 08 / 2013

**Transaction ID : A-CF17441**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**John D. Graham**

Mailing Address 2417 E Boston Road

City State Zip Code  
Bloomington IN 47401-6155

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

Name of Employer Occupation  
Indiana University Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 23 / 2013

**Transaction ID : A-CF17488**

Amount of Each Receipt this Period  
**1000**

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

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

**3000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 99
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

Full Name (Last, First, Middle Initial) <b>Lance Green</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 28 / 2013
Mailing Address 23124 Pocket Road		<b>Transaction ID : A-CF17695</b>
City Batesville	State IN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Batesville Tool	Occupation VP Materials	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

Full Name (Last, First, Middle Initial) <b>Scott Guentner</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 04 / 2013
Mailing Address 6110 Stonegate Run		<b>Transaction ID : A-CF17377</b>
City Zionsville	State IN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer The Dermatology Center of Indiana, PC	Occupation Physician / Dermatologist	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

Full Name (Last, First, Middle Initial) <b>John Harman</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 08 / 2013
Mailing Address 528 Main Street Suite 202		<b>Transaction ID : A-CF17434</b>
City Evansville	State IN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer Vigo Coal Company, Inc.	Occupation Management	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 99
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Paul M Harrington**

Mailing Address 11521 Willow Ridge Drive

City State Zip Code  
Zionsville IN 46077-7824

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

Name of Employer Occupation Information Requested  
Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 08 / 2013

**Transaction ID : A-CF17523**

Amount of Each Receipt this Period  
1000

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

Mailing Address 6104 Regal Springs Drive

City State Zip Code  
Louisville KY 40205-3322

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

Name of Employer Occupation  
Harshaw Trane Businessman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : A-CF17738**

Amount of Each Receipt this Period  
1000

**C.** Full Name (Last, First, Middle Initial)  
**James G. Hawkins**

Mailing Address 1213 W Estate Drive

City State Zip Code  
Bloomington IN 47403-9046

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 08 / 2013

**Transaction ID : A-CF17560**

Amount of Each Receipt this Period  
250

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 99
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Andrew Hill**

Mailing Address 409 N Roosevelt Street

City: Bloomington State: IN Zip Code: 47408-4186

FEC ID number of contributing federal political committee: C

Name of Employer: Indiana University Occupation: Programmer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500

Date of Receipt: 12 / 23 / 2013

**Transaction ID : A-CF17717**

Amount of Each Receipt this Period: 500

**B.** Full Name (Last, First, Middle Initial)  
**Kirk S. Hill**

Mailing Address 4734 Briarwood Trace

City: Carmel State: IN Zip Code: 46033-4652

FEC ID number of contributing federal political committee: C

Name of Employer: Highland Capital Brokerage Occupation: Sales Representative

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000

Date of Receipt: 12 / 08 / 2013

**Transaction ID : A-CF17534**

Amount of Each Receipt this Period: 1000

**C.** Full Name (Last, First, Middle Initial)  
**Susan C Hoback**

Mailing Address 11744 Arborhill Drive

City: Zionsville State: IN Zip Code: 46077-9683

FEC ID number of contributing federal political committee: C

Name of Employer: Retired Occupation: Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000

Date of Receipt: 11 / 23 / 2013

**Transaction ID : A-CF17476**

Amount of Each Receipt this Period: 1000

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 99
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Thomas G. Hoback**

Mailing Address 11744 Arborhill Drive

City State Zip Code  
Zionsville IN 46077-9683

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

Name of Employer Occupation  
Indiana Railroad Railroad executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		23		2013

**Transaction ID : A-CF17495**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Craig S. Huse**

Mailing Address 6823 Fox Lake North Dr

City State Zip Code  
Indianapolis IN 46278

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

Name of Employer Occupation  
St Elmo Inc. Restaurant Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
12		13		2013

**Transaction ID : A-CF17601**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Joseph M Ivcevic**

Mailing Address 7556 Morningside Drive

City State Zip Code  
Indianapolis IN 46240-2859

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

Name of Employer Occupation  
AXA-Advisors, LLC Financial Services Rep

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1200**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
12		08		2013

**Transaction ID : A-CF17543**

Amount of Each Receipt this Period  
**1000**

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

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

**3000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 99
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Thomas A. John**

Mailing Address 2015 N Delaware Street

City Indianapolis State IN Zip Code 46202-1529

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

Name of Employer Ice Miller, LLP Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 13 / 2013

**Transaction ID : A-CF17604**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Douglas W. Johnson**

Mailing Address PO Box 1225

City Bedford State IN Zip Code 47421-1225

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

Name of Employer JA Benefits, LLC Occupation Managing Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 13 / 2013

**Transaction ID : A-CF17593**

Amount of Each Receipt this Period  
**2500**

Reattribution/Redesignation requested

**C.** Full Name (Last, First, Middle Initial)  
**Douglas W. Johnson**

Mailing Address PO Box 1225

City Bedford State IN Zip Code 47421-1225

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

Name of Employer JA Benefits, LLC Occupation Managing Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 30 / 2013

**Transaction ID : A-MCNF6394**

Amount of Each Receipt this Period  
**-900**

Redesignation from primary  
**[MEMO ITEM]**

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

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

**3500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 99
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

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

Mailing Address **PO Box 1225**

City **Bedford** State **IN** Zip Code **47421-1225**

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

Name of Employer **JA Benefits, LLC** Occupation **Managing Partner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 30 / 2013**

**Transaction ID : A-MCNF6395**

Amount of Each Receipt this Period  
**900**

Redesignation to general  
**[MEMO ITEM]**

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

Mailing Address **10 Kelp Grove Road**

City **Nashville** State **IN** Zip Code **47448-9278**

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

Name of Employer **Self-Employed** Occupation **Dentist**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 13 / 2013**

**Transaction ID : A-CF17595**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Kenneth W Kaczmarek**

Mailing Address **3491 E Saddlebrook Court**

City **Bloomington** State **IN** Zip Code **47401-8554**

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

Name of Employer **Peloton Wealth Strategists** Occupation **Partner Managing Director**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 21 / 2013**

**Transaction ID : A-CF17643**

Amount of Each Receipt this Period  
**1000**

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

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

**1500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 99
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Larry F. Kaelin**

Mailing Address 428 Adios Court

City Carmel State IN Zip Code 46032-1090

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

Name of Employer The Indiana Railroad Company Occupation Sales

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 08 / 2013

**Transaction ID : A-CF17519**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Frank R. Kolisek**

Mailing Address 1260 Innovation Parkway Suite 100

City Greenwood State IN Zip Code 46143-3602

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

Name of Employer Ortho Indy Occupation Orthopaedic Surgeon

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 13 / 2013

**Transaction ID : A-CF17563**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Kent W Lanum**

Mailing Address 1805 Elk Pointe Boulevard

City Jeffersonville State IN Zip Code 47130-7901

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

Name of Employer Paul Ogle Foundation Occupation President/CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 06 / 2013

**Transaction ID : A-CF17536**

Amount of Each Receipt this Period  
**300**

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

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

**1550.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 99
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Jack W. Laugle**

Mailing Address 3719 E 700 N

City Whiteland State IN Zip Code 46184-9703

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

Name of Employer Innovative Casting Tech Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : A-MCNF6399**

Amount of Each Receipt this Period  
 2600

Reattribution to spouse

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Jack W. Laugle**

Mailing Address 3719 E 700 N

City Whiteland State IN Zip Code 46184-9703

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

Name of Employer Innovative Casting Tech Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : A-MCNF6400**

Amount of Each Receipt this Period  
 -2600

Redesignation from primary

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Jack W. Laugle**

Mailing Address 3719 E 700 N

City Whiteland State IN Zip Code 46184-9703

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

Name of Employer Innovative Casting Tech Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : A-MCNF6401**

Amount of Each Receipt this Period  
 2600

Redesignation to general

**[MEMO ITEM]**

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

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

0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 99
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Sandra L. Laugle</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 31 / 2013
Mailing Address 3719 E 700 N		<b>Transaction ID : A-CF17733</b>
City Whiteland	State IN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5200
Name of Employer Homemaker	Occupation Homemaker	Reattribution/Redesignation requested
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200	

Full Name (Last, First, Middle Initial) <b>B. Sandra L. Laugle</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 31 / 2013
Mailing Address 3719 E 700 N		<b>Transaction ID : A-MCNF6396</b>
City Whiteland	State IN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -2600
Name of Employer Homemaker	Occupation Homemaker	Redesignation from primary
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200	<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>C. Sandra L. Laugle</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 31 / 2013
Mailing Address 3719 E 700 N		<b>Transaction ID : A-MCNF6397</b>
City Whiteland	State IN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600
Name of Employer Homemaker	Occupation Homemaker	Redesignation to general
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200	<b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5200.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 99
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Sandra L. Laugle**

Mailing Address 3719 E 700 N

City Whiteland State IN Zip Code 46184-9703

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : A-MCNF6398**

Amount of Each Receipt this Period  
 -2600

Reattribution from spouse

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Bruce A. Lieberman**

Mailing Address 224 S Michigan Avenue Suite 330

City Chicago State IL Zip Code 60604-2505

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

Name of Employer Anacostia & Pacific Occupation Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 23 / 2013

**Transaction ID : A-CF17479**

Amount of Each Receipt this Period  
 400

**C.** Full Name (Last, First, Middle Initial)  
**Brian Logue**

Mailing Address 2907 S McIntire Drive

City Bloomington State IN Zip Code 47403-4225

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

Name of Employer Summit Urology Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 24 / 2013

**Transaction ID : A-CF17504**

Amount of Each Receipt this Period  
 1500

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

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

**1900.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 99
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Lee J Marchant**

Mailing Address 3818 E Devonshire Lane

City: Bloomington State: IN Zip Code: 47408-9657

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

Name of Employer: Bloomington Hospital Occupation: Board Member

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **2600**

Date of Receipt: 10 / 14 / 2013

**Transaction ID : A-MCNF6384**

Amount of Each Receipt this Period: **-2400**

Reattribution from spouse

**[MEMO ITEM]**

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

Mailing Address 3818 E Devonshire Lane

City: Bloomington State: IN Zip Code: 47408-9657

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

Name of Employer: Bloomington Hospital Occupation: Board Member

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **5000**

Date of Receipt: 09 / 07 / 2013

**Transaction ID : A-RRF17219**

Amount of Each Receipt this Period: **5000**

Reattribution/Redesignation requested

**[MEMO ITEM]**  
As originally reported -- see reattribution/redesignation memos.

**C.** Full Name (Last, First, Middle Initial)  
**Maureen Ann Marchant**

Mailing Address 3818 E Devonshire Lane

City: Bloomington State: IN Zip Code: 47408-9657

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

Name of Employer: Retired Occupation: Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **2400**

Date of Receipt: 10 / 14 / 2013

**Transaction ID : A-MCNF6385**

Amount of Each Receipt this Period: **2400**

Reattribution to spouse

**[MEMO ITEM]**

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

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

**0.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 99
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**John Brian Maryan**

Mailing Address 5667 Banta Road

City Martinsville State IN Zip Code 46151-6949

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

Name of Employer Solar Sources Occupation Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**11 / 08 / 2013**

**Transaction ID : A-CF17438**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Donald P McArdle**

Mailing Address 4656 W Jefferson Boulevard Suite 210

City Fort Wayne State IN Zip Code 46804-6884

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

Name of Employer McArdle Realty & Consulting Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**12 / 31 / 2013**

**Transaction ID : A-CF17737**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Richard McConn**

Mailing Address 1301 Dolley Madison Boulevard

City Mc Lean State VA Zip Code 22101-3912

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

Name of Employer M International Inc Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**11 / 02 / 2013**

**Transaction ID : A-CF17418**

Amount of Each Receipt this Period  
**2000**

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

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

**3500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 99
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**James Y McCullough Jr.**

Mailing Address 3407 Jaffrey Drive

City State Zip Code  
New Albany IN 47150-4232

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 21 / 2013

**Transaction ID : A-CF17633**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Harry F. McNaught Jr.**

Mailing Address 425 McLaren Lane

City State Zip Code  
Carmel IN 46032-9198

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

Name of Employer Occupation  
Denison Properties, Inc. Real Estate Developer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 21 / 2013

**Transaction ID : A-CF17654**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**John W. Mead**

Mailing Address 132 E Eastern Hills Boulevard

City State Zip Code  
Salem IN 47167-9719

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

Name of Employer Occupation  
Self-Employed Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1500**

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 05 / 2013

**Transaction ID : A-CF17539**

Amount of Each Receipt this Period  
**1000**

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

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

**2500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 99
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**James W. Merritt Jr.**

Mailing Address 10327 Tarpon Drive

City Indianapolis State IN Zip Code 46256-9792

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

Name of Employer The Indiana Rail Road Co. Occupation Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 08 / 2013**

**Transaction ID : A-CF17443**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Dayton H Molendorp**

Mailing Address 6507 Castle Knoll Court

City Indianapolis State IN Zip Code 46250-1439

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

Name of Employer AUL Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 21 / 2013**

**Transaction ID : A-CF17638**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**John Scott Morgan**

Mailing Address 90 W Morgan Street

City Austin State IN Zip Code 47102-1741

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

Name of Employer Morgan Foods Inc Occupation Food Manufacturing

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 31 / 2013**

**Transaction ID : A-CF17739**

Amount of Each Receipt this Period  
**5000**  
 Reattribution/Redesignation requested

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

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

**6250.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 99
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**John Scott Morgan**

Mailing Address 90 W Morgan Street

City Austin State IN Zip Code 47102-1741

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

Name of Employer Morgan Foods Inc Occupation Food Manufacturing

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : A-MCNF6402**

Amount of Each Receipt this Period  
 -2400

Redesignation from primary

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**John Scott Morgan**

Mailing Address 90 W Morgan Street

City Austin State IN Zip Code 47102-1741

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

Name of Employer Morgan Foods Inc Occupation Food Manufacturing

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : A-MCNF6403**

Amount of Each Receipt this Period  
 2400

Redesignation to general

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**John T. Mulheran**

Mailing Address 10553 Hyde Park

City Carmel State IN Zip Code 46032-8300

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

Name of Employer Highland Capital Brokerage Occupation Insurance

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 13 / 2013

**Transaction ID : A-CF17562**

Amount of Each Receipt this Period  
 500

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 99
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Larry W. Myers**

Mailing Address 11820 Springhill Gardens Drive

City	State	Zip Code
Louisville	KY	40223-1374

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

Name of Employer	Occupation
First Savings Bank	Banker - President & CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 21 / 2013**

**Transaction ID : A-CF17624**

Amount of Each Receipt this Period  
**300**

**B.** Full Name (Last, First, Middle Initial)  
**Gregory A. Olinger**

Mailing Address 665 Pebble Beach Drive

City	State	Zip Code
Huntingburg	IN	47542-9237

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

Name of Employer	Occupation
United Minerals Co.	Mining

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 07 / 2013**

**Transaction ID : A-CF17452**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Robert James Padgett**

Mailing Address 2612 French Creek Drive

City	State	Zip Code
New Albany	IN	47150-9111

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

Name of Employer	Occupation
Padgett, Inc.	Business Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 15 / 2013**

**Transaction ID : A-MCNF6390**

Amount of Each Receipt this Period  
**-2600**  
 Redesignation from primary  
**[MEMO ITEM]**

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

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

**1300.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 99
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Robert James Padgett**

Mailing Address 2612 French Creek Drive

City State Zip Code  
New Albany IN 47150-9111

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

Name of Employer Padgett, Inc. Occupation Business Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 16 / 2013

**Transaction ID : A-RRF17279**

Amount of Each Receipt this Period  
5200

Reattribution/Redesignation requested

**[MEMO ITEM]**  
As originally reported -- see reattribution/redesignation memos.

**B.** Full Name (Last, First, Middle Initial)  
**Robert James Padgett**

Mailing Address 2612 French Creek Drive

City State Zip Code  
New Albany IN 47150-9111

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

Name of Employer Padgett, Inc. Occupation Business Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 15 / 2013

**Transaction ID : A-MCNF6391**

Amount of Each Receipt this Period  
2600

Redesignation to general

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Michael Park**

Mailing Address 2040 Hunter Mill Road

City State Zip Code  
Vienna VA 22181-2805

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

Name of Employer Alston Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 14 / 2013

**Transaction ID : A-CF17473**

Amount of Each Receipt this Period  
1000

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

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

1000.00

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

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

FOR LINE NUMBER: (check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 35 OF 99

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**John C Passananti**

Mailing Address 1515 W 22nd Street  
 Suite 300

City State Zip Code  
 Oak Brook IL 60523-8410

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

Name of Employer Occupation  
 AXA Advisors Executive VP

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 08 / 2013

**Transaction ID : A-CF17533**

Amount of Each Receipt this Period  
 500

**B.** Full Name (Last, First, Middle Initial)  
**Richard J. Pfeil**

Mailing Address 100 E Wayne Street  
 Suite 300

City State Zip Code  
 South Bend IN 46601-2352

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

Name of Employer Occupation  
 Pfeil Inc. Business Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 23 / 2013

**Transaction ID : A-CF17482**

Amount of Each Receipt this Period  
 1000

**C.** Full Name (Last, First, Middle Initial)  
**Raymond T. Purk**

Mailing Address 3675 Wood Trace

City State Zip Code  
 Owensboro KY 42303-2430

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

Name of Employer Occupation  
 Alliance Coal Management

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 250

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 08 / 2013

**Transaction ID : A-CF17445**

Amount of Each Receipt this Period  
 250

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 99
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Jodi L Ray**

Mailing Address 523 Twin Oaks Drive

City Carmel State IN Zip Code 46032-9722

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

Name of Employer Indiana Railroad Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 08 / 2013

**Transaction ID : A-CF17442**

Amount of Each Receipt this Period  
**250**

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

Mailing Address 9106 Chickawane Court

City Alexandria State VA Zip Code 22309-2909

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

Name of Employer Alston Occupation Senior Policy Advisor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 22 / 2013

**Transaction ID : A-CF17502**

Amount of Each Receipt this Period  
**1500**

**C.** Full Name (Last, First, Middle Initial)  
**Jana L Rechter**

Mailing Address 8513 Alma Street

City Nashville State IN Zip Code 47448-8037

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

Name of Employer Rogers Groups Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 23 / 2013

**Transaction ID : A-CF17494**

Amount of Each Receipt this Period  
**2500**  
 Reattribution/Redesignation requested

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

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

**4250.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 99
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Paula M Robinson**

Mailing Address 7635 Jersey Park Road

City State Zip Code  
Floyds Knobs IN 47119-8649

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2013**

**Transaction ID : A-CF17406**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**M. Michael Rooney**

Mailing Address 2050 Main Street  
Suite 500

City State Zip Code  
Irvine CA 92614-8270

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

Name of Employer Occupation  
AXA Advisors Senior Executive VP

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 23 / 2013**

**Transaction ID : A-CF17493**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Douglas C. Rose**

Mailing Address PO Box 90175

City State Zip Code  
Indianapolis IN 46290-0175

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

Name of Employer Occupation  
Irwin R. Rose Real Estate Investments

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 19 / 2013**

**Transaction ID : A-CF17404**

Amount of Each Receipt this Period  
**1000**

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

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

**2500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 99
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Anthony W Rust**

Mailing Address 1196 N County Road 250 E

City Brownstown State IN Zip Code 47220-8550

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

Name of Employer Rose Acre Occupation Farmer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 21 / 2013

**Transaction ID : A-CF17625**

Amount of Each Receipt this Period  
**1000**

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

Mailing Address 899 S College Mall Road # 362

City Bloomington State IN Zip Code 47401-6301

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

Name of Employer Self-Employed Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : A-CF17704**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Gary N. Schahet**

Mailing Address 9333 N Meridian Street Suite 203

City Indianapolis State IN Zip Code 46260-1821

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

Name of Employer Schahet Hotels, Inc Occupation Hotel Management

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 23 / 2013

**Transaction ID : A-CF17484**

Amount of Each Receipt this Period  
**2400**  
 Reattribution/Redesignation requested

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

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

**3900.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 99
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Michael A. Schwenk**

Mailing Address 1750 Mushroom Lane

City Jasper State IN Zip Code 47546-9013

FEC ID number of contributing federal political committee.

Name of Employer Jasper Engines & Transmissions Occupation Vice President Manufacturing

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : A-CF17412**

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**Ralph J. Schwenk**

Mailing Address 151 N Skyview Drive

City Jasper State IN Zip Code 47546-8118

FEC ID number of contributing federal political committee.

Name of Employer Jasper Engine Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : A-CF17410**

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**Raymond J. Schwenk**

Mailing Address 1663 Gregory Lane

City Jasper State IN Zip Code 47546-9038

FEC ID number of contributing federal political committee.

Name of Employer Jasper Innovative Solutions Occupation Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : A-CF17411**

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 99
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**John M. Segal**

Mailing Address 1325 Altmeyer Road

City Jasper State IN Zip Code 47546-1839

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 21 / 2013

**Transaction ID : A-CF17636**

Amount of Each Receipt this Period  
**1000**

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

Mailing Address 55 Williams Creek Boulevard

City Indianapolis State IN Zip Code 46240-2581

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

Name of Employer Bingham, Greenebaum Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : A-CF17711**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mark I Shublak**

Mailing Address 3752 E 71st Street

City Indianapolis State IN Zip Code 46220-3718

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

Name of Employer Ice Miller, LLP Occupation Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 29 / 2013

**Transaction ID : A-CF17677**

Amount of Each Receipt this Period  
**2600**

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

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

**4600.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 99
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Fred Smith Jr.**

Mailing Address 1 Smith Hill

City State Zip Code  
Tell City IN 47586-2000

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 31 / 2013

**Transaction ID : A-CF17736**

Amount of Each Receipt this Period  
2600

**B.** Full Name (Last, First, Middle Initial)  
**Jonathan S. Smith**

Mailing Address PO Box 621

City State Zip Code  
Santa Claus IN 47579-0621

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

Name of Employer Occupation  
C&s, Inc. President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 31 / 2013

**Transaction ID : A-CF17735**

Amount of Each Receipt this Period  
2600

**C.** Full Name (Last, First, Middle Initial)  
**Jeffrey H. Smulyan**

Mailing Address 5101 Green Braes East Drive

City State Zip Code  
Indianapolis IN 46234-2915

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

Name of Employer Occupation  
Emmis Communications Broadcaster

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
M M / D D / Y Y Y Y  
11 / 23 / 2013

**Transaction ID : A-CF17487**

Amount of Each Receipt this Period  
500

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

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

5700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 99
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Charles Stegall**

Mailing Address 7302 Timberneck Court

City State Zip Code  
Charlotte NC 28277-0397

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

Name of Employer Occupation  
Consolidated Planning, Inc Financial Advisor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 31 2013**

**Transaction ID : A-CF17713**

Amount of Each Receipt this Period  
**1000**

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

Mailing Address 3635 Woodside Drive

City State Zip Code  
Columbus IN 47203-1229

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

Name of Employer Occupation  
Self-Employed Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2600**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 13 2013**

**Transaction ID : A-MCNF6386**

Amount of Each Receipt this Period  
**-1500**

Reattribution from spouse  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Christopher Stevens**

Mailing Address 3635 Woodside Drive

City State Zip Code  
Columbus IN 47203-1229

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

Name of Employer Occupation  
Self-Employed Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**4100**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 30 2013**

**Transaction ID : A-RRF17371**

Amount of Each Receipt this Period  
**1500**

Reattribution/Redesignation requested  
**[MEMO ITEM]**  
As originally reported -- see reattribution/redesignation memos.

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

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

**1000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 99
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Jessica J. Stevens**

Mailing Address 3635 Woodside Drive

City Columbus State IN Zip Code 47203-1229

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

Name of Employer The Inn at Irwin Gardens Occupation Self-Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 13 / 2013**

**Transaction ID : A-MCNF6387**

Amount of Each Receipt this Period  
**1500**

Reattribution to spouse

**[MEMO ITEM]**

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

Mailing Address 1462 E Commander Court

City Bloomington State IN Zip Code 47401-9343

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1200**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 23 / 2013**

**Transaction ID : A-CF17490**

Amount of Each Receipt this Period  
**1200**

**C.** Full Name (Last, First, Middle Initial)  
**Jonathan W Surdam**

Mailing Address 2519 E Summer Creek Drive

City Bloomington State IN Zip Code 47401-8201

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

Name of Employer IU Health Occupation Orthopedic Surgeon

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 21 / 2013**

**Transaction ID : A-CF17644**

Amount of Each Receipt this Period  
**500**

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

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

**1700.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 99
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**D. Billings Swain**

Mailing Address 338 Mutton Creek Drive

City Seymour State IN Zip Code 47274-4042

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 11 / 2013

**Transaction ID : A-MCNF6389**

Amount of Each Receipt this Period  
 100

Reattribution to spouse

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Helen W. Swain**

Mailing Address 338 Mutton Creek Drive

City Seymour State IN Zip Code 47274-4042

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2013

**Transaction ID : A-CF17408**

Amount of Each Receipt this Period  
 100

Reattribution/Redesignation requested

**C.** Full Name (Last, First, Middle Initial)  
**Helen W. Swain**

Mailing Address 338 Mutton Creek Drive

City Seymour State IN Zip Code 47274-4042

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 11 / 2013

**Transaction ID : A-MCNF6388**

Amount of Each Receipt this Period  
 -100

Reattribution from spouse

**[MEMO ITEM]**

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

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

100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 99
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Thomas N Tarzian**

Mailing Address 1100 S High Street

City Bloomington State IN Zip Code 47401-6108

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

Name of Employer Sarkes Tarzian, Inc. Occupation Chairman/CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 08 / 2013

**Transaction ID : A-CF17556**

Amount of Each Receipt this Period  
 2500

Earmarked through National Association Of Broadcasters PAC.

**B.** Full Name (Last, First, Middle Initial)  
**Phillip A. Terry**

Mailing Address 7228 S Arlington Avenue

City Indianapolis State IN Zip Code 46237-9356

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

Name of Employer Monarch Beverage Co. Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 23 / 2013

**Transaction ID : A-CF17718**

Amount of Each Receipt this Period  
 500

**C.** Full Name (Last, First, Middle Initial)  
**Matthew A. Thornton**

Mailing Address 10101 Linn Station Road Suite 200

City Louisville State KY Zip Code 40223-3819

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

Name of Employer Thornton Oil Inc Occupation Retail Sales

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 29 / 2013

**Transaction ID : A-CF17686**

Amount of Each Receipt this Period  
 2500

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 99
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Brent R. Tilson**

Mailing Address 1249 W Stones Crossing Road

City Greenwood State IN Zip Code 46143-8554

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

Name of Employer Tilson Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 02 / 2013

**Transaction ID : A-CF17538**

Amount of Each Receipt this Period  
**5000**

Reattribution/Redesignation requested

**B.** Full Name (Last, First, Middle Initial)  
**Timothy P. Trysla**

Mailing Address 3715 Fulton Street NW

City Washington State DC Zip Code 20007-1343

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

Name of Employer Alston & Bird LLP Occupation Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 21 / 2013

**Transaction ID : A-CF17622**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Douglas A. Wasitis**

Mailing Address 4866 Blagden Avenue NW

City Washington State DC Zip Code 20011-3716

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

Name of Employer Indiana University Occupation Assistant Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 06 / 2013

**Transaction ID : A-CF17537**

Amount of Each Receipt this Period  
**750**

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

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

**6250.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 99
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Michael Weinberg**

Mailing Address 4 Milestone Road

City Rye Brook State NY Zip Code 10573-1081

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

Name of Employer WISE Financial Advisors Occupation Registered Representative

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 21 / 2013

**Transaction ID : A-CF17503**

Amount of Each Receipt this Period  
 1000

**B.** Full Name (Last, First, Middle Initial)  
**Thomas E. Wheeler II**

Mailing Address 5036 Turkey Foot Road

City Zionsville State IN Zip Code 46077-8736

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

Name of Employer Frost Brown Todd LLC Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 21 / 2013

**Transaction ID : A-CF17623**

Amount of Each Receipt this Period  
 1000

**C.** Full Name (Last, First, Middle Initial)  
**John S Whittington**

Mailing Address 15200 E 200 S

City Columbus State IN Zip Code 47203-8346

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

Name of Employer Grammer Industries Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 23 / 2013

**Transaction ID : A-CF17489**

Amount of Each Receipt this Period  
 1000

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 99
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Ralph M. Wilson**

Mailing Address 6405 Keith Springs Circle

City Louisville State KY Zip Code 40207-2380

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

Name of Employer Humana, Inc. Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 13 / 2013

**Transaction ID : A-CF17574**

Amount of Each Receipt this Period  
 250

**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)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y

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)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

250.00

122250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 99
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**ABBVIE PAC**

Mailing Address 1 N Waukegan Road

City North Chicago State IL Zip Code 60064-1802

FEC ID number of contributing federal political committee. **C C00536573**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 21 / 2013

**Transaction ID : A-CF17630**

Amount of Each Receipt this Period  
1500

**B.** Full Name (Last, First, Middle Initial)  
**Action Committee for Rural Electrification**

Mailing Address 4301 Wilson Boulevard

City Arlington State VA Zip Code 22203-1867

FEC ID number of contributing federal political committee. **C C00002972**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 08 / 2013

**Transaction ID : A-CF17447**

Amount of Each Receipt this Period  
3000

**C.** Full Name (Last, First, Middle Initial)  
**Aetna Inc. PAC**

Mailing Address 20 F Street NW  
Suite 350

City Washington State DC Zip Code 20001-6706

FEC ID number of contributing federal political committee. **C C00181826**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 29 / 2013

**Transaction ID : A-CF17693**

Amount of Each Receipt this Period  
2000

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

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

6500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 99
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A. Full Name (Last, First, Middle Initial)**  
**AFLAC PAC**

Mailing Address 1932 Wynnton Road

City Columbus State GA Zip Code 31999-0001

FEC ID number of contributing federal political committee. **C C00034157**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 13 / 2013

**Transaction ID : A-CF17598**

Amount of Each Receipt this Period  
 1000

**B. Full Name (Last, First, Middle Initial)**  
**American Academy Of Neurology BrainPAC**

Mailing Address 509B 2nd Street NE  
Lower LEVEL

City Washington State DC Zip Code 20002-4916

FEC ID number of contributing federal political committee. **C C00435933**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 08 / 2013

**Transaction ID : A-CF17541**

Amount of Each Receipt this Period  
 1000

**C. Full Name (Last, First, Middle Initial)**  
**American Apparel And Footwear Association PAC**

Mailing Address 1601 NORTH STREET SUITE 1200

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C C00338442**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 08 / 2013

**Transaction ID : A-CF17521**

Amount of Each Receipt this Period  
 1000

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 99
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**American Bankers Association PAC**

Mailing Address 1120 Connecticut Avenue NW  
Suite 600

City Washington State DC Zip Code 20036-3971

FEC ID number of contributing federal political committee. **C C00004275**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **4000**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 21 / 2013

**Transaction ID : A-CF17628**

Amount of Each Receipt this Period  
 1000

**B.** Full Name (Last, First, Middle Initial)  
**American Council Of Life Insurers PAC**

Mailing Address 101 Constitution Avenue NW  
Suite 700

City Washington State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C C00147066**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 29 / 2013

**Transaction ID : A-CF17687**

Amount of Each Receipt this Period  
 1000

**C.** Full Name (Last, First, Middle Initial)  
**American Optometric Association PAC**

Mailing Address 1505 Prince Street  
Suite 300

City Alexandria State VA Zip Code 22314-2874

FEC ID number of contributing federal political committee. **C C00024968**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 29 / 2013

**Transaction ID : A-CF17692**

Amount of Each Receipt this Period  
 2000

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 99
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A. American Orthotic & Prosthetic Association PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 330 John Carlyle Street  
Suite 200

City Alexandria State VA Zip Code 22314-5760

FEC ID number of contributing federal political committee. **C C00118430**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 29 / 2013

**Transaction ID : A-CF17683**

Amount of Each Receipt this Period  
 750

**B. American Water Works Co., Inc. PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 1770

City Voorhees State NJ Zip Code 08043-7770

FEC ID number of contributing federal political committee. **C C00354548**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 21 / 2013

**Transaction ID : A-CF17631**

Amount of Each Receipt this Period  
 500

**C. AT&T Inc. Federal PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 208 S Akard Street  
Front 2701

City Dallas State TX Zip Code 75202-4295

FEC ID number of contributing federal political committee. **C C00109017**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 21 / 2013

**Transaction ID : A-CF17632**

Amount of Each Receipt this Period  
 1500

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

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

2750.00

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

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

FOR LINE NUMBER: PAGE 53 OF 99  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A. Best Buy Co., Inc Employee Political Forum**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7601 Penn Avenue S  
 City Richfield State MN Zip Code 55423-3645  
 FEC ID number of contributing federal political committee. **C** C00405076  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 08 / 2013  
**Transaction ID : A-CF17554**  
 Amount of Each Receipt this Period  
 500

**B. Capital One Financial Corp. Assoc. Political Fund**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1680 Capital One Drive  
 Attn 19050-120  
 City McLean State VA Zip Code 22102-3407  
 FEC ID number of contributing federal political committee. **C** C00326595  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 29 / 2013  
**Transaction ID : A-CF17685**  
 Amount of Each Receipt this Period  
 1000

**C. Citigroup Inc. PAC - Federal**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1101 Pennsylvania Avenue NW  
 Suite 1000  
 City Washington State DC Zip Code 20004-2524  
 FEC ID number of contributing federal political committee. **C** C00008474  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 29 / 2013  
**Transaction ID : A-CF17684**  
 Amount of Each Receipt this Period  
 1000

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 99
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**CMR PAC**

Mailing Address **PO Box 2485**

City **Springfield** State **VA** Zip Code **22152-0485**

FEC ID number of contributing federal political committee. **C C00469429**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **4028.9**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**12 / 29 / 2013**

**Transaction ID : A-CF17681**

Amount of Each Receipt this Period  
**4028.9**

**B.** Full Name (Last, First, Middle Initial)  
**CSX Corporation Good Government Fund**

Mailing Address **1331 Pennsylvania Avenue NW  
Suite 560**

City **Washington** State **DC** Zip Code **20004-1745**

FEC ID number of contributing federal political committee. **C C00163832**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **4000**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**11 / 23 / 2013**

**Transaction ID : A-CF17480**

Amount of Each Receipt this Period  
**2000**

**C.** Full Name (Last, First, Middle Initial)  
**CSX Corporation Good Government Fund**

Mailing Address **1331 Pennsylvania Avenue NW  
Suite 560**

City **Washington** State **DC** Zip Code **20004-1745**

FEC ID number of contributing federal political committee. **C C00163832**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **4000**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**12 / 13 / 2013**

**Transaction ID : A-CF17602**

Amount of Each Receipt this Period  
**2000**

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

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

**8028.90**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 99
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A. Dan Burton For Congress Committee**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 50593  
 City Indianapolis State IN Zip Code 46250-0593  
 FEC ID number of contributing federal political committee. **C** C00145862  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 23 / 2013  
**Transaction ID : A-CF17481**  
 Amount of Each Receipt this Period  
 1000

**B. Duke Energy Corporation PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 550 S Tryon Street  
 City Charlotte State NC Zip Code 28202-4200  
 FEC ID number of contributing federal political committee. **C** C00083535  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 3000

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 08 / 2013  
**Transaction ID : A-CF17549**  
 Amount of Each Receipt this Period  
 1000

**C. Eli Lilly And Company PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Lilly Corporate Center  
 City Indianapolis State IN Zip Code 46285-0001  
 FEC ID number of contributing federal political committee. **C** C00082792  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 6000

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 08 / 2013  
**Transaction ID : A-CF17552**  
 Amount of Each Receipt this Period  
 1000

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 99
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A. Employee Owned S Corporations of America PAC**

Full Name (Last, First, Middle Initial)  
Employee Owned S Corporations of America PAC

Mailing Address 805 15th Street NW  
Suite 650

City Washington State DC Zip Code 20005-2281

FEC ID number of contributing federal political committee. **C** C00458257

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1500

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 02 / 2013

**Transaction ID : A-CF17407**

Amount of Each Receipt this Period  
 1500

**B. ESOP Association PAC**

Full Name (Last, First, Middle Initial)  
ESOP Association PAC

Mailing Address 1726 M Street NW  
Suite 501

City Washington State DC Zip Code 20036-4522

FEC ID number of contributing federal political committee. **C** C00196089

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 08 / 2013

**Transaction ID : A-CF17555**

Amount of Each Receipt this Period  
 500

**C. Food Marketing Institute PAC**

Full Name (Last, First, Middle Initial)  
Food Marketing Institute PAC

Mailing Address 2345 Crystal Drive  
Suite 800

City Arlington State VA Zip Code 22202-4813

FEC ID number of contributing federal political committee. **C** C00014555

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 08 / 2013

**Transaction ID : A-CF17551**

Amount of Each Receipt this Period  
 1000

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 99
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Fresenius Medical Care North America PAC**

Mailing Address 801 Pennsylvania Avenue NW  
Suite 255

City Washington State DC Zip Code 20004-3637

FEC ID number of contributing federal political committee. **C** C00401299

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1500

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 02 / 2013

**Transaction ID : A-CF17416**

Amount of Each Receipt this Period  
 1500

**B.** Full Name (Last, First, Middle Initial)  
**General Electric Company PAC**

Mailing Address 1299 Pennsylvania Avenue NW  
Suite 900W

City Washington State DC Zip Code 20004-2400

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 02 / 2013

**Transaction ID : A-CF17419**

Amount of Each Receipt this Period  
 3000

**C.** Full Name (Last, First, Middle Initial)  
**Gentiva Health Services Inc PAC**

Mailing Address 3350 Riverwood Parkway SE  
Suite 1400

City Atlanta State GA Zip Code 30339-3314

FEC ID number of contributing federal political committee. **C** C00407080

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 08 / 2013

**Transaction ID : A-CF17546**

Amount of Each Receipt this Period  
 1000

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 99
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Indiana Statewide Assn Of Rural Electric Cooperatives Inc PAC**

Mailing Address 720 N High School Road

City Indianapolis State IN Zip Code 46214-3756

FEC ID number of contributing federal political committee. **C** C00103978

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 08 / 2013

**Transaction ID : A-CF17449**

Amount of Each Receipt this Period  
 2000

**B.** Full Name (Last, First, Middle Initial)  
**International Council Of Shopping Centers Inc PAC**

Mailing Address 555 12th Street NW Suite 660

City Washington State DC Zip Code 20004-1241

FEC ID number of contributing federal political committee. **C** C00217638

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 4500

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 13 / 2013

**Transaction ID : A-CF17603**

Amount of Each Receipt this Period  
 2000

**C.** Full Name (Last, First, Middle Initial)  
**Lowe's Companies, Inc. PAC**

Mailing Address 1000 Lowes Boulevard

City Mooresville State NC Zip Code 28117-8520

FEC ID number of contributing federal political committee. **C** C00251751

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 08 / 2013

**Transaction ID : A-CF17544**

Amount of Each Receipt this Period  
 2000

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 99
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A. Full Name (Last, First, Middle Initial)**  
**Marathon Petroleum Corporation Employees PAC**

Mailing Address PO Box 75000

City State Zip Code  
Detroit MI 48275-0001

FEC ID number of contributing federal political committee. **C C00496307**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 29 / 2013

**Transaction ID : A-CF17678**

Amount of Each Receipt this Period  
5000

**B. Full Name (Last, First, Middle Initial)**  
**Microsoft Corporation PAC**

Mailing Address 16011 NE 36th Way # 97017

City State Zip Code  
Redmond WA 98052-6301

FEC ID number of contributing federal political committee. **C C00227546**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 29 / 2013

**Transaction ID : A-CF17679**

Amount of Each Receipt this Period  
1000

**C. Full Name (Last, First, Middle Initial)**  
**National Association Of Insurance And Financial Advisors PAC**

Mailing Address 2901 Telestar Court

City State Zip Code  
Falls Church VA 22042-1260

FEC ID number of contributing federal political committee. **C C00005249**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 29 / 2013

**Transaction ID : A-CF17688**

Amount of Each Receipt this Period  
1000

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 99
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A. National Association Of Real Estate Investment Trusts, Inc. PAC**

Full Name (Last, First, Middle Initial)  
National Association Of Real Estate Investment Trusts, Inc. PAC

Mailing Address 1875 I Street NW  
Suite 600

City Washington State DC Zip Code 20006-5413

FEC ID number of contributing federal political committee. **C** C00303339

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5000

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 08 / 2013

**Transaction ID : A-CF17542**

Amount of Each Receipt this Period  
1500

**B. National Beer Wholesalers Association PAC**

Full Name (Last, First, Middle Initial)  
National Beer Wholesalers Association PAC

Mailing Address 1101 King Street  
Suite 600

City Alexandria State VA Zip Code 22314-2965

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5000

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 13 / 2013

**Transaction ID : A-CF17600**

Amount of Each Receipt this Period  
4000

**C. National Community Pharmacists Association PAC**

Full Name (Last, First, Middle Initial)  
National Community Pharmacists Association PAC

Mailing Address 100 Daingerfield Road

City Alexandria State VA Zip Code 22314-6302

FEC ID number of contributing federal political committee. **C** C00030809

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 21 / 2013

**Transaction ID : A-CF17629**

Amount of Each Receipt this Period  
1000

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

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

6500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 99
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A. National Emergency Medicine PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1125 Executive Circle  
 City Irving State TX Zip Code 75038-2522  
 FEC ID number of contributing federal political committee. **C** C00140061  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 2000

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 08 / 2013  
**Transaction ID : A-CF17553**  
 Amount of Each Receipt this Period  
 2000

**B. National Rifle Association of America Political Victory Fund**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11250 Waples Mill Road  
 City Fairfax State VA Zip Code 22030-6003  
 FEC ID number of contributing federal political committee. **C** C00053553  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 29 / 2013  
**Transaction ID : A-CF17689**  
 Amount of Each Receipt this Period  
 1000

**C. National Roofing Contractors Association PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 324 4th Street NE  
 City Washington State DC Zip Code 20002-5824  
 FEC ID number of contributing federal political committee. **C** C00244863  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 13 / 2013  
**Transaction ID : A-CF17597**  
 Amount of Each Receipt this Period  
 1000

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 99
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Oracle America, Inc. PAC**

Mailing Address 1015 15th Street NW  
Suite 200

City Washington State DC Zip Code 20005-2635

FEC ID number of contributing federal political committee. **C C00323048**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1135**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 19 / 2013

**Transaction ID : A-IF17701**

Amount of Each Receipt this Period  
**135**

Inkind: Facility Rental

**B.** Full Name (Last, First, Middle Initial)  
**Re-Elect Tim Griffin For Congress Committee**

Mailing Address PO Box 7526

City Little Rock State AR Zip Code 72217-7526

FEC ID number of contributing federal political committee. **C C00468116**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**4000**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 13 / 2013

**Transaction ID : A-CF17605**

Amount of Each Receipt this Period  
**2000**

**C.** Full Name (Last, First, Middle Initial)  
**Re-Elect Tim Griffin For Congress Committee**

Mailing Address PO Box 7526

City Little Rock State AR Zip Code 72217-7526

FEC ID number of contributing federal political committee. **C C00468116**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**4000**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 13 / 2013

**Transaction ID : A-CF17606**

Amount of Each Receipt this Period  
**2000**

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

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

**4135.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 99
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A. Republican Mainstreet Partnership PAC**

Full Name (Last, First, Middle Initial)  
Republican Mainstreet Partnership PAC

Mailing Address 1220 L Street NW  
Suite 100-263

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00165159

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 08 / 2013

**Transaction ID : A-CF17535**

Amount of Each Receipt this Period  
 1000

**B. Retail Industry Leaders Association PAC**

Full Name (Last, First, Middle Initial)  
Retail Industry Leaders Association PAC

Mailing Address 1700 N Moore Street  
Suite 2250

City Arlington State VA Zip Code 22209-1933

FEC ID number of contributing federal political committee. **C** C00112763

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 08 / 2013

**Transaction ID : A-CF17545**

Amount of Each Receipt this Period  
 2000

**C. Rite Aid Corporation PAC**

Full Name (Last, First, Middle Initial)  
Rite Aid Corporation PAC

Mailing Address 30 Hunter Lane

City Camp Hill State PA Zip Code 17011-2400

FEC ID number of contributing federal political committee. **C** C00104083

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 500

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 13 / 2013

**Transaction ID : A-CF17599**

Amount of Each Receipt this Period  
 500

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 64 OF 99	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Targetcitizens Political Forum**

Mailing Address 1000 Nicollet Mall  
Tpn 1101

City Minneapolis State MN Zip Code 55403-2542

FEC ID number of contributing federal political committee. **C** C00098061

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 08 / 2013

**Transaction ID : A-CF17547**

Amount of Each Receipt this Period  
2500

**B.** Full Name (Last, First, Middle Initial)  
**Teachers Insurance Annuity Assoc of America College Retirement Equities Fund PAC**

Mailing Address 601 13th Street NW  
Suite 700 N

City Washington State DC Zip Code 20005-3807

FEC ID number of contributing federal political committee. **C** C00431361

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 08 / 2013

**Transaction ID : A-CF17446**

Amount of Each Receipt this Period  
1000

**C.** Full Name (Last, First, Middle Initial)  
**The Freedom Project PAC**

Mailing Address 631 Pennsylvania Avenue SE  
Suite B

City Washington State DC Zip Code 20003-4452

FEC ID number of contributing federal political committee. **C** C00305805

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 29 / 2013

**Transaction ID : A-CF17680**

Amount of Each Receipt this Period  
5000

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

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

8500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 99
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A. The Premier, Inc. Employees' Civic Action Fund**

Full Name (Last, First, Middle Initial)  
Mailing Address 444 N Capitol Street NW  
Suite 625  
City Washington State DC Zip Code 20001-1581

FEC ID number of contributing federal political committee. **C C00346288**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 08 / 2013

**Transaction ID : A-CF17550**

Amount of Each Receipt this Period  
1500

**B. Wal-Mart Stores Inc. PAC For Responsible Government**

Full Name (Last, First, Middle Initial)  
Mailing Address 702 SW 8th Street  
City Bentonville State AR Zip Code 72716-6209

FEC ID number of contributing federal political committee. **C C00093054**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 21 / 2013

**Transaction ID : A-CF17626**

Amount of Each Receipt this Period  
1000

**C. Walgreen Co PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 104 Wilmot Road  
# 1447  
City Deerfield State IL Zip Code 60015-5121

FEC ID number of contributing federal political committee. **C C00160770**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 08 / 2013

**Transaction ID : A-CF17548**

Amount of Each Receipt this Period  
2500

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 99
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Wine and Spirits Wholesalers of America, Inc. PAC**

Mailing Address 805 15th Street NW  
Suite 430

City Washington State DC Zip Code 20005-2273

FEC ID number of contributing federal political committee. **C** C00147173

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 13 / 2013

**Transaction ID : A-CF17596**

Amount of Each Receipt this Period  
5000

**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)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y

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)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

5000.00

87913.90

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 99			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

Full Name (Last, First, Middle Initial) <b>A. 300 New Jersey Partners</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013
Mailing Address 300 New Jersey Avenue NW Suite 601		Amount of Each Disbursement this Period 250
City Washington State DC Zip Code 20001-2080	Purpose of Disbursement Facility Rental	Transaction ID : B-E-17265
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address PO Box 981540		Amount of Each Disbursement this Period 14.6
City El Paso State TX Zip Code 79998-1540	Purpose of Disbursement Credit Card Merchant Fees	Transaction ID : B-E-17513
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2013
Mailing Address PO Box 981540		Amount of Each Disbursement this Period 174.79
City El Paso State TX Zip Code 79998-1540	Purpose of Disbursement Credit Card Merchant Fee	Transaction ID : B-E-17378
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	439.39
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 99			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2013
Mailing Address PO Box 981540		Amount of Each Disbursement this Period 318.73
City El Paso	State TX	
Zip Code 79998-1540	Purpose of Disbursement Credit Card Merchant Fee	<b>Transaction ID : B-E-17461</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Aristotle International</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 700
City Washington	State DC	
Zip Code 20003-1164	Purpose of Disbursement Compliance Software	<b>Transaction ID : B-E-17269</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Aristotle International</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2013
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 700
City Washington	State DC	
Zip Code 20003-1164	Purpose of Disbursement Compliance Software	<b>Transaction ID : B-E-17397</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1718.73
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 99		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Aristotle International</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2013
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 700 <b>Transaction ID : B-E-17475</b>
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement Compliance Software Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Art Sanctuary</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2013
Mailing Address 190 N Sycamore Street		Amount of Each Disbursement this Period 400 <b>Transaction ID : B-E-17499</b>
City Martinsville State IN Zip Code 46151-1521	Purpose of Disbursement Facility Rental Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Baugh Enterprises, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013
Mailing Address 1611 S Rogers Street		Amount of Each Disbursement this Period 1023.22 <b>Transaction ID : B-E-17243</b>
City Bloomington State IN Zip Code 47403-3574	Purpose of Disbursement Printing Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2123.22
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 99			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

Full Name (Last, First, Middle Initial) <b>A. BrabenderCox, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013		
Mailing Address 1218 Grandview Avenue			Amount of Each Disbursement this Period 1750		
City Pittsburgh	State PA	Zip Code 15211-1239	Transaction ID : B-E-17267		
Purpose of Disbursement Website Development/Consulting		Category/ Type 001			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. BrabenderCox, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2013		
Mailing Address 1218 Grandview Avenue			Amount of Each Disbursement this Period 1750		
City Pittsburgh	State PA	Zip Code 15211-1239	Transaction ID : B-E-17396		
Purpose of Disbursement Website Development/Consulting		Category/ Type 001			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>c. BrabenderCox, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2013		
Mailing Address 1218 Grandview Avenue			Amount of Each Disbursement this Period 1750		
City Pittsburgh	State PA	Zip Code 15211-1239	Transaction ID : B-E-17515		
Purpose of Disbursement Website Development/Consulting		Category/ Type 001			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 99			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Broghamer Consulting LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 04 / 2013</b>
Mailing Address <b>502 Monroe Street</b>		Amount of Each Disbursement this Period <b>3050.9</b> <b>Transaction ID : B-E-17335</b>
City <b>Newport</b>	State <b>KY</b>	
Zip Code <b>41071-2006</b>	Purpose of Disbursement <b>Compliance Consulting</b>	Category/ Type <b>001</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2014</b>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Broghamer Consulting LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 05 / 2013</b>
Mailing Address <b>502 Monroe Street</b>		Amount of Each Disbursement this Period <b>3040.43</b> <b>Transaction ID : B-E-17421</b>
City <b>Newport</b>	State <b>KY</b>	
Zip Code <b>41071-2006</b>	Purpose of Disbursement <b>Compliance Consulting</b>	Category/ Type <b>001</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2014</b>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Broghamer Consulting LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>12 / 05 / 2013</b>
Mailing Address <b>502 Monroe Street</b>		Amount of Each Disbursement this Period <b>3010.4</b> <b>Transaction ID : B-E-17505</b>
City <b>Newport</b>	State <b>KY</b>	
Zip Code <b>41071-2006</b>	Purpose of Disbursement <b>Compliance Consulting</b>	Category/ Type <b>001</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2014</b>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>9101.73</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 99		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Cafe 166</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2013
Mailing Address 166 E Morgan Street		Amount of Each Disbursement this Period 106.65 <b>Transaction ID : B-E-17611</b>
City Martinsville State IN Zip Code 46151-1543	Purpose of Disbursement Food/Beverage Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Cafe 166</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2013
Mailing Address 166 E Morgan Street		Amount of Each Disbursement this Period 255.96 <b>Transaction ID : B-E-17612</b>
City Martinsville State IN Zip Code 46151-1543	Purpose of Disbursement Food/Beverage Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2013
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 50.57 <b>Transaction ID : B-E-17398</b>
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement Food/Beverage Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	413.18
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 99			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 725.94 <b>Transaction ID : B-E-17500</b>
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement Food/Beverage Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Cedarview Management Corp.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address 601 N College Avenue Suite 1A		Amount of Each Disbursement this Period 300 <b>Transaction ID : B-E-17384</b>
City Bloomington State IN Zip Code 47404-3853	Purpose of Disbursement Rent Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Cedarview Management Corp.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013
Mailing Address 601 N College Avenue Suite 1A		Amount of Each Disbursement this Period 300 <b>Transaction ID : B-E-17425</b>
City Bloomington State IN Zip Code 47404-3853	Purpose of Disbursement Rent Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	725.94
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 99			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Cedarview Management Corp.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address 601 N College Avenue Suite 1A		Amount of Each Disbursement this Period 300 <b>Transaction ID : B-E-17529</b>
City Bloomington	State IN	
Zip Code 47404-3853	Purpose of Disbursement Rent	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address 1593 Spring Hill Road Suite 400		Amount of Each Disbursement this Period 852.75 <b>Transaction ID : B-E-17383</b>
City Tysons Corner	State VA	
Zip Code 22182	Purpose of Disbursement Credit Card Merchant Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2013
Mailing Address 1593 Spring Hill Road Suite 400		Amount of Each Disbursement this Period 313.13 <b>Transaction ID : B-E-17430</b>
City Tysons Corner	State VA	
Zip Code 22182	Purpose of Disbursement Credit Card Merchant Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1465.88
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 99			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

Full Name (Last, First, Middle Initial) <b>A. CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2013
Mailing Address 1593 Spring Hill Road Suite 400		Amount of Each Disbursement this Period 189.63 <b>Transaction ID : B-E-17509</b>
City Tysons Corner	State VA Zip Code 22182	
Purpose of Disbursement Credit Card Merchant Fee	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 1593 Spring Hill Road Suite 400		Amount of Each Disbursement this Period 332.5 <b>Transaction ID : B-E-17725</b>
City Tysons Corner	State VA Zip Code 22182	
Purpose of Disbursement Credit Card Merchant Fee	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. EC Consulting, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013
Mailing Address 526 6th Street SE		Amount of Each Disbursement this Period 12101.85 <b>Transaction ID : B-E-17336</b>
City Washington	State DC Zip Code 20003-2705	
Purpose of Disbursement Finance Consulting	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	12623.98
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 76 OF 99	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

Full Name (Last, First, Middle Initial) <b>A. EC Consulting, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2013
Mailing Address 526 6th Street SE		Amount of Each Disbursement this Period 1556.3 <b>Transaction ID : B-E-17433</b>
City Washington State DC Zip Code 20003-2705	Purpose of Disbursement Finance Consulting Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. EC Consulting, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2013
Mailing Address 526 6th Street SE		Amount of Each Disbursement this Period 4415.28 <b>Transaction ID : B-E-17511</b>
City Washington State DC Zip Code 20003-2705	Purpose of Disbursement Finance Consulting Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. FedEx Kinkos</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2013
Mailing Address PO Box 94515		Amount of Each Disbursement this Period 9.2 <b>Transaction ID : B-E-17382</b>
City Palatine State IL Zip Code 60094-4515	Purpose of Disbursement Delivery Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5980.78
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 99			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

Full Name (Last, First, Middle Initial) <b>A. FedEx Kinkos</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2013		
Mailing Address PO Box 94515			Amount of Each Disbursement this Period 9.2		
City Palatine	State IL	Zip Code 60094-4515	Transaction ID : B-E-17392		
Purpose of Disbursement Delivery		Category/ Type 001			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. FedEx Kinkos</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2013		
Mailing Address PO Box 94515			Amount of Each Disbursement this Period 51.55		
City Palatine	State IL	Zip Code 60094-4515	Transaction ID : B-E-17399		
Purpose of Disbursement Delivery		Category/ Type 001			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. FedEx Kinkos</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013		
Mailing Address PO Box 94515			Amount of Each Disbursement this Period 4.62		
City Palatine	State IL	Zip Code 60094-4515	Transaction ID : B-E-17422		
Purpose of Disbursement Delivery		Category/ Type 001			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	65.37
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 99			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

Full Name (Last, First, Middle Initial) <b>A. FedEx Kinkos</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2013
Mailing Address PO Box 94515			Amount of Each Disbursement this Period 9.2 <b>Transaction ID : B-E-17459</b>
City Palatine	State IL	Zip Code 60094-4515	
Purpose of Disbursement Delivery	Candidate Name		Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. FedEx Kinkos</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address PO Box 94515			Amount of Each Disbursement this Period 9.25 <b>Transaction ID : B-E-17467</b>
City Palatine	State IL	Zip Code 60094-4515	
Purpose of Disbursement Delivery	Candidate Name		Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. FedEx Kinkos</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2013
Mailing Address PO Box 94515			Amount of Each Disbursement this Period 9.25 <b>Transaction ID : B-E-17508</b>
City Palatine	State IL	Zip Code 60094-4515	
Purpose of Disbursement Delivery	Candidate Name		Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	27.70
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 99			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

Full Name (Last, First, Middle Initial) <b>A. FedEx Kinkos</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address PO Box 94515			Amount of Each Disbursement this Period 9.2 <b>Transaction ID : B-E-17616</b>
City Palatine	State IL	Zip Code 60094-4515	
Purpose of Disbursement Delivery		Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) <b>B. FedEx Kinkos</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2013
Mailing Address PO Box 94515			Amount of Each Disbursement this Period 44.35 <b>Transaction ID : B-E-17660</b>
City Palatine	State IL	Zip Code 60094-4515	
Purpose of Disbursement Delivery		Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) <b>C. FedEx Kinkos</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2013
Mailing Address PO Box 94515			Amount of Each Disbursement this Period 9.2 <b>Transaction ID : B-E-17661</b>
City Palatine	State IL	Zip Code 60094-4515	
Purpose of Disbursement Delivery		Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	62.75
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 99			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

Full Name (Last, First, Middle Initial) <b>A. FedEx Kinkos</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address PO Box 94515			Amount of Each Disbursement this Period ..... 10.19
City Palatine	State IL	Zip Code 60094-4515	
Purpose of Disbursement Delivery		Category/ Type 001	<b>Transaction ID : B-E-17659</b>
Candidate Name			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) <b>B. FedEx Kinkos</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2013
Mailing Address PO Box 94515			Amount of Each Disbursement this Period ..... 44.35
City Palatine	State IL	Zip Code 60094-4515	
Purpose of Disbursement Delivery		Category/ Type 001	<b>Transaction ID : B-E-17670</b>
Candidate Name			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) <b>C. FedEx Kinkos</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2013
Mailing Address PO Box 94515			Amount of Each Disbursement this Period ..... 9.2
City Palatine	State IL	Zip Code 60094-4515	
Purpose of Disbursement Delivery		Category/ Type 001	<b>Transaction ID : B-E-17671</b>
Candidate Name			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	..... 63.74
<b>TOTAL</b> This Period (last page this line number only).....	.....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 99			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

Full Name (Last, First, Middle Initial) <b>A. FedEx Kinkos</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address PO Box 94515		Amount of Each Disbursement this Period 18.4 <b>Transaction ID : B-E-17724</b>
City Palatine	State IL	
Zip Code 60094-4515	Purpose of Disbursement Delivery	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Hubers Plantation Hall</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013
Mailing Address 19816 Huber Road		Amount of Each Disbursement this Period 1000 <b>Transaction ID : B-E-17266</b>
City Borden	State IN	
Zip Code 47106-8309	Purpose of Disbursement Facility Rental/Catering	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Info Group Enterprise</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2013
Mailing Address 1020 E 1st Street		Amount of Each Disbursement this Period 810 <b>Transaction ID : B-E-17457</b>
City Papillion	State NE	
Zip Code 68046-7611	Purpose of Disbursement List Rental	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1828.40
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 99			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Kip May Photography</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013
Mailing Address 2521 N Skyline Drive		Amount of Each Disbursement this Period 214 <b>Transaction ID : B-E-17497</b>
City Bloomington	State IN	
Purpose of Disbursement Photography Service	Category/ Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Maxwells Office Products</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2013
Mailing Address 1915 S Walnut Street		Amount of Each Disbursement this Period 185 <b>Transaction ID : B-E-17420</b>
City Bloomington	State IN	
Purpose of Disbursement Office Supplies	Category/ Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Merche-Solutions</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address 3600 Bridge Parkway Suite 102		Amount of Each Disbursement this Period 240.12 <b>Transaction ID : B-E-17462</b>
City Redwood City	State CA	
Purpose of Disbursement Credit Card Merchant Fee	Category/ Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	639.12
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 99			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Merche-Solutions</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2013
Mailing Address 3600 Bridge Parkway Suite 102		Amount of Each Disbursement this Period 394.26
City Redwood City	State CA Zip Code 94065-6139	
Purpose of Disbursement Credit Card Merchant Fee	Category/Type 001	<b>Transaction ID : B-E-17528</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Michaels Uptown Cafe</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address 102 E Kirkwood Avenue		Amount of Each Disbursement this Period 46.65
City Bloomington	State IN Zip Code 47408-3330	
Purpose of Disbursement Food/Beverage	Category/Type 001	<b>Transaction ID : B-E-17615</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Might and Main, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013
Mailing Address 1821 E Ruby Lane		Amount of Each Disbursement this Period 7388.03
City Bloomington	State IN Zip Code 47401-6054	
Purpose of Disbursement Finance Consulting	Category/Type 001	<b>Transaction ID : B-E-17344</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7828.94
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 99			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Might and Main, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2013
Mailing Address 1821 E Ruby Lane		Amount of Each Disbursement this Period 3550 <b>Transaction ID : B-E-17432</b>
City Bloomington	State IN	
Zip Code 47401-6054	Purpose of Disbursement Finance Consulting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Might and Main, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2013
Mailing Address 1821 E Ruby Lane		Amount of Each Disbursement this Period 3550 <b>Transaction ID : B-E-17512</b>
City Bloomington	State IN	
Zip Code 47401-6054	Purpose of Disbursement Finance Consulting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Morgan County Republican Central Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2013
Mailing Address 2385 N Blue Bluff Road		Amount of Each Disbursement this Period 250 <b>Transaction ID : B-E-17388</b>
City Martinsville	State IN	
Zip Code 46151-7443	Purpose of Disbursement Event Sponsorship	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7350.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 99			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. Paycor</b>		M M / D D / Y Y Y Y 10 / 03 / 2013
Mailing Address 644 Linn Street Suite 200		Amount of Each Disbursement this Period
City Cincinnati State OH Zip Code 45203-1734		435.75
Purpose of Disbursement Payroll Taxes		<b>Transaction ID : B-E-17380</b>
Candidate Name		Category/Type 001
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. Paycor</b>		M M / D D / Y Y Y Y 10 / 03 / 2013
Mailing Address 644 Linn Street Suite 200		Amount of Each Disbursement this Period
City Cincinnati State OH Zip Code 45203-1734		57
Purpose of Disbursement Payroll Service		<b>Transaction ID : B-E-17381</b>
Candidate Name		Category/Type 001
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C. Paycor</b>		M M / D D / Y Y Y Y 10 / 17 / 2013
Mailing Address 644 Linn Street Suite 200		Amount of Each Disbursement this Period
City Cincinnati State OH Zip Code 45203-1734		435.75
Purpose of Disbursement Payroll Taxes		<b>Transaction ID : B-E-17403</b>
Candidate Name		Category/Type 001
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	928.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 99			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Paycor</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2013
Mailing Address 644 Linn Street Suite 200		Amount of Each Disbursement this Period 43.5
City Cincinnati	State OH	Zip Code 45203-1734
Purpose of Disbursement Payroll Service	Category/Type 001	
Candidate Name	Transaction ID : B-E-17401	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Paycor</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013
Mailing Address 644 Linn Street Suite 200		Amount of Each Disbursement this Period 435.75
City Cincinnati	State OH	Zip Code 45203-1734
Purpose of Disbursement Payroll Taxes	Category/Type 001	
Candidate Name	Transaction ID : B-E-17424	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Paycor</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013
Mailing Address 644 Linn Street Suite 200		Amount of Each Disbursement this Period 43.5
City Cincinnati	State OH	Zip Code 45203-1734
Purpose of Disbursement Payroll Service	Category/Type 001	
Candidate Name	Transaction ID : B-E-17426	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	522.75
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 99			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. Paycor</b>		M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address 644 Linn Street Suite 200		Amount of Each Disbursement this Period
City Cincinnati State OH Zip Code 45203-1734		435.75
Purpose of Disbursement Payroll Taxes	001	<b>Transaction ID : B-E-17465</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. Paycor</b>		M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address 644 Linn Street Suite 200		Amount of Each Disbursement this Period
City Cincinnati State OH Zip Code 45203-1734		43.5
Purpose of Disbursement Payroll Service	001	<b>Transaction ID : B-E-17463</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C. Paycor</b>		M M / D D / Y Y Y Y 12 / 03 / 2013
Mailing Address 644 Linn Street Suite 200		Amount of Each Disbursement this Period
City Cincinnati State OH Zip Code 45203-1734		435.75
Purpose of Disbursement Payroll Taxes	001	<b>Transaction ID : B-E-17530</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	915.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 99			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. Paycor</b>		M M / D D / Y Y Y Y 12 / 04 / 2013
Mailing Address 644 Linn Street Suite 200		Amount of Each Disbursement this Period
City Cincinnati	State OH	Zip Code 45203-1734
Purpose of Disbursement Payroll Service	Category/Type 001	
Candidate Name	Transaction ID : B-E-17532	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. Paycor</b>		M M / D D / Y Y Y Y 12 / 18 / 2013
Mailing Address 644 Linn Street Suite 200		Amount of Each Disbursement this Period
City Cincinnati	State OH	Zip Code 45203-1734
Purpose of Disbursement Payroll Taxes	Category/Type 001	
Candidate Name	Transaction ID : B-E-17663	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C. Paycor</b>		M M / D D / Y Y Y Y 12 / 19 / 2013
Mailing Address 644 Linn Street Suite 200		Amount of Each Disbursement this Period
City Cincinnati	State OH	Zip Code 45203-1734
Purpose of Disbursement Payroll Taxes	Category/Type 001	
Candidate Name	Transaction ID : B-E-17662	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	563.25
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 99			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Paycor</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2013
Mailing Address 644 Linn Street Suite 200		Amount of Each Disbursement this Period 52 <b>Transaction ID : B-E-17664</b>
City Cincinnati State OH Zip Code 45203-1734	Purpose of Disbursement Payroll Service Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Paycor</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2013
Mailing Address 644 Linn Street Suite 200		Amount of Each Disbursement this Period 75.95 <b>Transaction ID : B-E-17728</b>
City Cincinnati State OH Zip Code 45203-1734	Purpose of Disbursement Payroll Taxes Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Revelant Technologies</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2013
Mailing Address 5875 Castle Creek Pkwy N Dr Suite 300		Amount of Each Disbursement this Period 975 <b>Transaction ID : B-E-17395</b>
City Indianapolis State IN Zip Code 46250-4329	Purpose of Disbursement Data Services Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1102.95
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 99			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Shoeboxed.com</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2013
Mailing Address 112 Broadway Street Suite B		Amount of Each Disbursement this Period 29.95 <b>Transaction ID : B-E-17428</b>
City Durham	State NC	
Zip Code 27701-2402	Purpose of Disbursement Software	Category/Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Shoeboxed.com</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2013
Mailing Address 112 Broadway Street Suite B		Amount of Each Disbursement this Period 29.95 <b>Transaction ID : B-E-17507</b>
City Durham	State NC	
Zip Code 27701-2402	Purpose of Disbursement Software	Category/Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Shoeboxed.com</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2013
Mailing Address 112 Broadway Street Suite B		Amount of Each Disbursement this Period 29.95 <b>Transaction ID : B-E-17727</b>
City Durham	State NC	
Zip Code 27701-2402	Purpose of Disbursement Software	Category/Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	89.85
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 99			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Storage Express</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2013
Mailing Address PO Box 70		Amount of Each Disbursement this Period 88 <b>Transaction ID : B-E-17391</b>
City Bloomington	State IN	
Zip Code 47402-0070	Purpose of Disbursement Storage	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Storage Express</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address PO Box 70		Amount of Each Disbursement this Period 88 <b>Transaction ID : B-E-17468</b>
City Bloomington	State IN	
Zip Code 47402-0070	Purpose of Disbursement Storage	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Storage Express</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2013
Mailing Address PO Box 70		Amount of Each Disbursement this Period 88 <b>Transaction ID : B-E-17613</b>
City Bloomington	State IN	
Zip Code 47402-0070	Purpose of Disbursement Storage	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	264.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 99		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

Full Name (Last, First, Middle Initial) <b>A. T&amp;W Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2013
Mailing Address 17 W Southern Avenue		Amount of Each Disbursement this Period 206.17 <b>Transaction ID : B-E-17370</b>
City Covington State KY Zip Code 41015-1482	Purpose of Disbursement Printing 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Taste</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013
Mailing Address 1600 Fitzgerald Lane		Amount of Each Disbursement this Period 2327.12 <b>Transaction ID : B-E-17268</b>
City Alexandria State VA Zip Code 22302-2004	Purpose of Disbursement Catering/Equipment Rental 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Transfirst</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2013
Mailing Address 1393 Veterans Highway		Amount of Each Disbursement this Period 664.42 <b>Transaction ID : B-E-17514</b>
City Hauppauge State NY Zip Code 11788-3066	Purpose of Disbursement Credit Card Merchant Fees 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3197.71
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 99			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Transfirst</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2013
Mailing Address 1393 Veterans Highway		Amount of Each Disbursement this Period 20 <b>Transaction ID : B-E-17390</b>
City Hauppauge State NY Zip Code 11788-3066	Purpose of Disbursement Credit Card Merchant Fee 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Transfirst</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 1393 Veterans Highway		Amount of Each Disbursement this Period 20 <b>Transaction ID : B-E-17472</b>
City Hauppauge State NY Zip Code 11788-3066	Purpose of Disbursement Credit Card Merchant Fee 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Transfirst</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2013
Mailing Address 1393 Veterans Highway		Amount of Each Disbursement this Period 20 <b>Transaction ID : B-E-17614</b>
City Hauppauge State NY Zip Code 11788-3066	Purpose of Disbursement Credit Card Merchant Fee 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	60.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 99			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>A. USPS</b>		M M / D D / Y Y Y Y 11 / 07 / 2013	
Mailing Address 475 Lenfant Plaza SW		Amount of Each Disbursement this Period	
City Washington State DC Zip Code 20260-0004		_____ 138	
Purpose of Disbursement Postage		Transaction ID : B-E-17458	
Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>B. USPS</b>		M M / D D / Y Y Y Y 12 / 05 / 2013	
Mailing Address 475 Lenfant Plaza SW		Amount of Each Disbursement this Period	
City Washington State DC Zip Code 20260-0004		_____ 40	
Purpose of Disbursement Postage		Transaction ID : B-E-17525	
Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>C. Verizon Wireless</b>		M M / D D / Y Y Y Y 10 / 29 / 2013	
Mailing Address 903 S College Mall Road		Amount of Each Disbursement this Period	
City Bloomington State IN Zip Code 47401-6302		_____ 573.37	
Purpose of Disbursement Phone Service		Transaction ID : B-E-17427	
Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	_____ 751.37
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 99			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2013
Mailing Address 903 S College Mall Road		Amount of Each Disbursement this Period 621.25 <b>Transaction ID : B-E-17429</b>
City Bloomington	State IN	
Zip Code 47401-6302	Purpose of Disbursement Phone Service	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2013
Mailing Address 903 S College Mall Road		Amount of Each Disbursement this Period 683.8 <b>Transaction ID : B-E-17506</b>
City Bloomington	State IN	
Zip Code 47401-6302	Purpose of Disbursement Phone Service	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2013
Mailing Address 903 S College Mall Road		Amount of Each Disbursement this Period 554.29 <b>Transaction ID : B-E-17726</b>
City Bloomington	State IN	
Zip Code 47401-6302	Purpose of Disbursement Phone Service	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1859.34
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 99			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Matthew Humm</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2013
Mailing Address PO Box 1053		Amount of Each Disbursement this Period 1179 <b>Transaction ID : B-E-17379</b>
City Bloomington	State IN	
Purpose of Disbursement Payroll	Category/ Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Matthew Humm</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2013
Mailing Address PO Box 1053		Amount of Each Disbursement this Period 1179 <b>Transaction ID : B-E-17402</b>
City Bloomington	State IN	
Purpose of Disbursement Payroll	Category/ Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Matthew Humm</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2013
Mailing Address PO Box 1053		Amount of Each Disbursement this Period 931.19 <b>Transaction ID : B-E-17387</b>
City Bloomington	State IN	
Purpose of Disbursement Travel/Office Equipment Reimbursement	Category/ Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3289.19
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 99			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Matthew Humm</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 18 / 2013</b>
Mailing Address <b>PO Box 1053</b>		Amount of Each Disbursement this Period <b>764.8</b>
City <b>Bloomington</b>	State <b>IN</b>	Zip Code <b>47402-1053</b>
Purpose of Disbursement <b>Mileage Reimbursement</b>	Category/Type <b>001</b>	
Candidate Name		<b>Transaction ID : B-S-7</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Matthew Humm(10/18/13)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 18 / 2013</b>
Mailing Address <b>903 S College Mall Road</b>		Amount of Each Disbursement this Period <b>139.1</b>
City <b>Bloomington</b>	State <b>IN</b>	Zip Code <b>47401-6302</b>
Purpose of Disbursement <b>Phone Service</b>	Category/Type <b>001</b>	
Candidate Name		<b>Transaction ID : B-S-9</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Matthew Humm(10/18/13)
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Matthew Humm</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 01 / 2013</b>
Mailing Address <b>PO Box 1053</b>		Amount of Each Disbursement this Period <b>1179</b>
City <b>Bloomington</b>	State <b>IN</b>	Zip Code <b>47402-1053</b>
Purpose of Disbursement <b>Payroll</b>	Category/Type <b>001</b>	
Candidate Name		<b>Transaction ID : B-E-17423</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1179.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 99			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Matthew Humm</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013	
Mailing Address PO Box 1053			Amount of Each Disbursement this Period 1179	
City Bloomington	State IN	Zip Code 47402-1053	Transaction ID : B-E-17464	
Purpose of Disbursement Payroll		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Matthew Humm</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013	
Mailing Address PO Box 1053			Amount of Each Disbursement this Period 1179	
City Bloomington	State IN	Zip Code 47402-1053	Transaction ID : B-E-17531	
Purpose of Disbursement Payroll		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Matthew Humm</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2013	
Mailing Address PO Box 1053			Amount of Each Disbursement this Period 1179	
City Bloomington	State IN	Zip Code 47402-1053	Transaction ID : B-E-17665	
Purpose of Disbursement Payroll		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3537.00
<b>TOTAL</b> This Period (last page this line number only).....	75968.76

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 99
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Todd Young, Inc.**

Full Name (Last, First, Middle Initial) <b>A. National Republican Congressional Committee</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 31 / 2013</b>
Mailing Address <b>320 1st Street SE</b>		Amount of Each Disbursement this Period <b>10000</b>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20003-1838</b>	Purpose of Disbursement Political Contribution	<b>011</b> Category/ Type
Candidate Name <b>National Republican Congressional Committee</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>Transaction ID : B-E-17405</b>

Full Name (Last, First, Middle Initial) <b>B. National Republican Congressional Committee</b>		Date of Disbursement M M / D D / Y Y Y Y <b>12 / 23 / 2013</b>
Mailing Address <b>320 1st Street SE</b>		Amount of Each Disbursement this Period <b>18000</b>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20003-1838</b>	Purpose of Disbursement Political Contribution	<b>011</b> Category/ Type
Candidate Name <b>National Republican Congressional Committee</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>Transaction ID : B-E-17657</b>

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>28000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>28000.00</b>