

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

ADDRESS (number and street) ONE INVACARE WAY
 Check if different than previously reported. (ACC)
ELYRIA OH 44035

2. **FEC IDENTIFICATION NUMBER** C00249896
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

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

5. Covering Period 01 01 2010 through 03 31 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Jerome E. Fox, Jr.
Signature of Treasurer Electronically Filed by Jerome E. Fox, Jr. Date 04 12 2010

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

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

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		15440.15
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	15440.15									
(c) Total Receipts (from Line 19)	13528.45	13528.45								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	28968.60	28968.60								
7. Total Disbursements (from Line 31)	9587.56	9587.56								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	19381.04	19381.04								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	11249.86	11249.86
(ii) Unitemized	2276.94	2276.94
(iii) TOTAL (add Lines 11(a)(i) and (ii)	13526.80	13526.80
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	13526.80	13526.80
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	1.65	1.65
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	13528.45	13528.45
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	13528.45	13528.45

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9500.00	9500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	72.40	72.40
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	72.40	72.40
29. Other Disbursements.....	15.16	15.16
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	9587.56	9587.56
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9587.56	9587.56

DETAILED SUMMARY PAGE
of Disbursements

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	13526.80	13526.80
34. Total Contribution Refunds (from Line 28(d))	72.40	72.40
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	13454.40	13454.40
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 13
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

<p>A. Full Name (Last, First, Middle Initial) Cara Bachenheimer</p> <p>Mailing Address 7413 Burtonwood Drive</p> <p>City State Zip Code Alexandria VA 22307</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Invacare Corporation VP Government Relations</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 499.98</p>	<p>Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2010</p> <p>Transaction ID: SA11AI.7418</p> <p>Amount of Each Receipt this Period 499.98</p> <p>Biweekly PR ded \$83.33 start 01/15/10</p>
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<p>B. Full Name (Last, First, Middle Initial) Gerald Blouch</p> <p>Mailing Address 1823 Arlington Road</p> <p>City State Zip Code Westlake OH 44145</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Invacare Corporation President & COO</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1249.98</p>	<p>Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2010</p> <p>Transaction ID: SA11AI.7419</p> <p>Amount of Each Receipt this Period 1249.98</p> <p>Biweekly PR ded \$208.33 start 01/15/10</p>
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<p>C. Full Name (Last, First, Middle Initial) Robert Boeye</p> <p>Mailing Address 30926 Inverness Circle</p> <p>City State Zip Code Westlake OH 44145</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Invacare Corporation VP, National Accounts</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 300.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2010</p> <p>Transaction ID: SA11AI.7420</p> <p>Amount of Each Receipt this Period 300.00</p> <p>Biweekly PR ded \$50 start 01/15/10</p>
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SUBTOTAL of Receipts This Page (optional)	2049.96
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 13
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

A. Full Name (Last, First, Middle Initial)
James Boland

Mailing Address 3877-4 Lander Road

City State Zip Code
Orange Village OH 44022

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt M M / D D / Y Y Y Y
0 2 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.7453

Amount of Each Receipt this Period 2500.00

Check contribution received

B. Full Name (Last, First, Middle Initial)
John Dmytriw

Mailing Address 7439 Lauren J Drive

City State Zip Code
Mentor OH 44060

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
 Invacare Corporation Director Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.7427

Amount of Each Receipt this Period 300.00

Biweekly PR ded \$50 start 01/15/10

C. Full Name (Last, First, Middle Initial)
Robert Gudbranson

Mailing Address 2521 Fairmount

City State Zip Code
Cleveland OH 44106

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
 Invacare Corporation Chief Financial Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1249.98

Date of Receipt M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.7431

Amount of Each Receipt this Period 1249.98

Biweekly PR ded \$208.33 start 01/15/10

SUBTOTAL of Receipts This Page (optional) 2409.98

TOTAL This Period (last page this line number only) 2409.98

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 13
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

A.	Full Name (Last, First, Middle Initial) Mark Kline		Date of Receipt
	Mailing Address 4488 Regal Circle		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Akron	OH	44321
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7434
Name of Employer Invacare Corporation		Occupation Director Retail Sales	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 300.00
			Biweekly PR ded \$50 start 01/15/10

B.	Full Name (Last, First, Middle Initial) Dale Laporte		Date of Receipt
	Mailing Address 23224 Winged Foot Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Westlake	OH	44145
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7455
Name of Employer Invacare Corporation		Occupation SR VP and General Counsel	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 1000.00
			Check Contribution Received

C.	Full Name (Last, First, Middle Initial) John Lescher		Date of Receipt
	Mailing Address 5048 Fitch Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Sheffield Village	OH	44054
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7469
Name of Employer Invacare Corporation		Occupation Product Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00
			Check contribution received

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1550.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 13
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

A.	Full Name (Last, First, Middle Initial) Lara Mahoney		Date of Receipt
	Mailing Address 26258 Cranage Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 24 / 2010
	City	State	Zip Code
	Olmsted Falls	OH	44138
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7470
Name of Employer Invacare Corporation		Occupation Manager, Communications & Marketing	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	Check contribution received

B.	Full Name (Last, First, Middle Initial) Joseph Richey		Date of Receipt
	Mailing Address 7325 Stump Hollow Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 31 / 2010
	City	State	Zip Code
	Chagrin Falls	OH	44022
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7439
Name of Employer Invacare Corporation		Occupation President - Invacare Technologies	Amount of Each Receipt this Period 1249.98
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1249.98	Biweekly PR ded \$208.33 start 01/15/10

C.	Full Name (Last, First, Middle Initial) Marc Schwartz		Date of Receipt
	Mailing Address 3 Undercliff Terrace		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 19 / 2010
	City	State	Zip Code
	West Orange	NJ	07052
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7474
Name of Employer Invacare Corporation		Occupation Territory Business Manager	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	Check contribution received

SUBTOTAL of Receipts This Page (optional)	1799.98
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 13
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

A.	Full Name (Last, First, Middle Initial) Louis FJ Slangen	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 39 Twin Oaks Drive	Transaction ID: SA11AI.7443
	City Akron State OH Zip Code 44313	Amount of Each Receipt this Period 1249.98
	FEC ID number of contributing federal political committee. C	Biweekly PR ded \$208.33 start 01/15/10
Name of Employer Invacare Corporation	Occupation Sr. VP Sales & Marketing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1249.98	

B.	Full Name (Last, First, Middle Initial) Michael Sotak	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 17916 Parkland Drive	Transaction ID: SA11AI.7444
	City Shaker Heights State OH Zip Code 44122	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	Biweekly PR ded \$50 start 01/15/10
Name of Employer Invacare Corporation	Occupation VP & General Manager IPG	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) Carl Will	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 4311 Walnut Creek Lane	Transaction ID: SA11AI.7450
	City Sandusky State OH Zip Code 44870	Amount of Each Receipt this Period 249.96
	FEC ID number of contributing federal political committee. C	Biweekly PR ded \$41.66 start 01/15/10
Name of Employer Invacare Corporation	Occupation Senior Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 249.96	

SUBTOTAL of Receipts This Page (optional)	▶	1799.94
TOTAL This Period (last page this line number only)	▶	11249.86

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

A.	Full Name (Last, First, Middle Initial) BOB CASEY FOR SENATE INC	Transaction ID: SB23.7464 Date of Disbursement																			
	Mailing Address 607 14TH STREET NW SUITE 800	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>1</td><td>/</td><td>0</td><td>6</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	0	6	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	1	/	0	6	/	2	0	1	0												
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Fundraising event of 01/08/10	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name BOB CASEY FOR SENATE INC	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) CITIZENS FOR ALTMIRE	Transaction ID: SB23.7460 Date of Disbursement																			
	Mailing Address P.O. Box 1776	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	0	2	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3	/	0	2	/	2	0	1	0												
	City Freedom State PA Zip Code 15042	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Fundraising event of 03/08/10	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name CITIZENS FOR ALTMIRE	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 04	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) Dave Camp for Congress	Transaction ID: SB23.7461 Date of Disbursement																			
	Mailing Address 139 Ashman	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>2</td><td>/</td><td>2</td><td>6</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2	/	2	6	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	2	/	2	6	/	2	0	1	0												
	City Midland State MI Zip Code 48640	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Fundraising event of 03/03/10	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name Dave Camp for Congress	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 04	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>3000.00</td></tr></table>	3000.00
3000.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td> </td></tr></table>	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

A.	Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee	Transaction ID: SB23.7463 Date of Disbursement
	Mailing Address 430 S. Capitol	<input type="text" value="01"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraising event of 02/03/10	<input type="text" value="1500.00"/>
	Candidate Name Democratic Congressional Campaign Committee	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FRIENDS OF SCHUMER	Transaction ID: SB23.7462 Date of Disbursement
	Mailing Address 509 MADISON AVE SUITE 1902	<input type="text" value="02"/> / <input type="text" value="02"/> / <input type="text" value="2010"/>
	City NEW YORK State NY Zip Code 10022	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraising event of 02/10/10	<input type="text" value="2000.00"/>
	Candidate Name FRIENDS OF SCHUMER	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) MIKE CRAPO FOR US SENATE	Transaction ID: SB23.7482 Date of Disbursement
	Mailing Address P.O. BOX 1948	<input type="text" value="03"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City BOISE State ID Zip Code 83701	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraising event of 03/25/10	<input type="text" value="1000.00"/>
	Candidate Name MIKE CRAPO FOR US SENATE	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ID District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 13 / 13

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC

A. Full Name (Last, First, Middle Initial) TIBERI FOR CONGRESS <hr/> Mailing Address 2021 E Dublin Granville Road Suite 2000 <hr/> City Columbus State OH Zip Code 43229 <hr/> Purpose of Disbursement Fundraising event of 03/29/10 Candidate Name TIBERI FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 12 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.7478 Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2010
	Amount of Each Disbursement this Period 1000.00 Category/Type 011
B. Full Name (Last, First, Middle Initial) WYDEN FOR SENATE <hr/> Mailing Address 232 NE 9TH AVENUE <hr/> City PORTLAND State OR Zip Code 97232 <hr/> Purpose of Disbursement Fundraising event of 03/09/10 Candidate Name WYDEN FOR SENATE <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 00 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.7458 Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2010
	Amount of Each Disbursement this Period 1000.00 Category/Type 011

SUBTOTAL of Disbursements This Page (optional) ►

2000.00

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

9500.00