

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

John Dale for Congress

ADDRESS (number and street)

9815 W. 510 S.

Check if different  
than previously  
reported. (ACC)

West Point

IN

47992

2. FEC IDENTIFICATION NUMBER ▼

C

C00553438

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

IN

04

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the  
State of

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the  
State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

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 Ms Kathleen M. Altman

Signature of Treasurer

Ms Kathleen M. Altman

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 14

Write or Type Committee Name

**John Dale for Congress**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	4

	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))....	12514.12	12514.12
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	12514.12	12514.12
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	8714.90	8714.90
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	8714.90	8714.90
8. Cash on Hand at Close of Reporting Period (from Line 27).....	3799.22	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

**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)

PAGE 3 / 14

Write or Type Committee Name

**John Dale for Congress**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	4

**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).....

7489.12

7489.12

(ii) Unitemized.....

4525.00

4525.00

(iii) TOTAL of contributions from individuals ▶

12014.12

12014.12

(b) Political Party Committees.....

0.00

0.00

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

500.00

500.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

12514.12

12514.12

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

0.00

**13. LOANS:**

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

0.00

0.00

**15. OTHER RECEIPTS (Dividends, Interest, etc.) .....**

0.00

0.00

**16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶**

12514.12

12514.12

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 14

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	8714.90	8714.90
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	8714.90	8714.90

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	12514.12
25. SUBTOTAL (add Line 23 and Line 24).....	12514.12
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	8714.90
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	3799.22

# **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 14

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 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)  
**John Dale for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mrs. Winfred Adler</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 07 / 2014	
Mailing Address 1001 Digby Road		Transaction ID : SA11AI.4245	
City West Lafayette	State IN		Zip Code 47906
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 250.00
Name of Employer n/a	Occupation retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>B. Ms Jacqueline Broder</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2014	
Mailing Address 2806 Waldrige Street		Transaction ID : SA11AI.4279	
City Florence	State AL		Zip Code 35663
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 250.00
Name of Employer n/a	Occupation retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>C. JOHN DALE</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2014	
Mailing Address 9815 W 510 S		Transaction ID : SA11AI.4217	
City WESTPOINT	State IN		Zip Code 47992
FEC ID number of contributing federal political committee. C H4IN04172			Amount of Each Receipt this Period 1000.00
Name of Employer Western Boone County School Co	Occupation teacher		In-kind - Rent for Campaign Headquarters
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<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:

PAGE 6 OF 14

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**John Dale for Congress**

Full Name (Last, First, Middle Initial)

**JOHN DALE**

Mailing Address 9815 W 510 S

City

WESTPOINT

State

IN

Zip Code

47992

FEC ID number of contributing  
federal political committee.

C H4IN04172

Name of Employer

Western Boone County School Co

Occupation

teacher

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2014

Transaction ID : SA11AI.4230

Amount of Each Receipt this Period

1000.00

In-kind -

Full Name (Last, First, Middle Initial)

**Mr. Robert F. Dale**

Mailing Address 2741 N. Salisbury Street # 1305

City

West Lafayette

State

IN

Zip Code

47906

FEC ID number of contributing  
federal political committee.

C

Name of Employer

n/a

Occupation

retired

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2014

Transaction ID : SA11AI.4219

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Mr. Robert F. Dale**

Mailing Address 2741 N. Salisbury Street # 1305

City

West Lafayette

State

IN

Zip Code

47906

FEC ID number of contributing  
federal political committee.

C

Name of Employer

n/a

Occupation

retired

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1020.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2014

Transaction ID : SA11AI.4247

Amount of Each Receipt this Period

20.00

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

2020.00

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:

PAGE 7 OF 14

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**John Dale for Congress**

Full Name (Last, First, Middle Initial)

**Mrs. Emma Dalsimer**

Mailing Address 2741 N. Salisbury St.

City

West Lafayette

State

IN

Zip Code

47906

FEC ID number of contributing  
federal political committee.

C

Name of Employer

n/a

Occupation

retired

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2014

Transaction ID : SA11AI.4192

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Mr. Theodore Harris**

Mailing Address 60 Huntington Way

City

Lafayette

State

IN

Zip Code

47906

FEC ID number of contributing  
federal political committee.

C

Name of Employer

n/a

Occupation

retired

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2014

Transaction ID : SA11AI.4204

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Mr. Theodore Harris**

Mailing Address 60 Huntington Way

City

Lafayette

State

IN

Zip Code

47906

FEC ID number of contributing  
federal political committee.

C

Name of Employer

n/a

Occupation

retired

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2014

Transaction ID : SA11AI.4254

Amount of Each Receipt this Period

250.00

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:

PAGE 8 OF 14

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**John Dale for Congress**

Full Name (Last, First, Middle Initial)

**Dr. Scott Hoyer**

Mailing Address 3008 Wilshire Avenue

City

West Lafayette

State

IN

Zip Code

47906

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
selfOccupation  
child neurologist

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		30		2014

Transaction ID : SA11AI.4224

Amount of Each Receipt this Period

1000.00

A.

Full Name (Last, First, Middle Initial)

**JC Printing and mailing services**

Mailing Address 3711 Piney Grove Drive

City

Lafayette

State

IN

Zip Code

47905

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

469.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		17		2014

Transaction ID : SA11AI.4281

Amount of Each Receipt this Period

469.12

In-kind - mailing services

B.

Full Name (Last, First, Middle Initial)

**Ms Barbara Kane**

Mailing Address 4122 Verdant Lane

City

West Lafayette

State

IN

Zip Code

47906

FEC ID number of contributing  
federal political committee.

C

Name of Employer

n/a

Occupation

retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		22		2014

Transaction ID : SA11AI.4145

Amount of Each Receipt this Period

250.00

C.

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

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

1719.12

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

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

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**John Dale for Congress**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Mr. Thomas Palfrey</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 22 / 2014	
Mailing Address 208 Lindbergy Avenue		<b>Transaction ID : SA11AI.4207</b>	
City West Lafayette	State IN	Zip Code 47906	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer n/a	Occupation retired	Amount of Each Receipt this Period 250.00	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	Amount of Each Receipt this Period 250.00	
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Mr. David Randle</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 17 / 2014	
Mailing Address 6880 S. 175 W.		<b>Transaction ID : SA11AI.4104</b>	
City Lebanon	State IN	Zip Code 46052	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer self	Occupation critic	Amount of Each Receipt this Period 250.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	Amount of Each Receipt this Period 250.00	
<b>C.</b> Full Name (Last, First, Middle Initial) <b>The Clinton County Democrat</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 14 / 2014	
Mailing Address P.O. Box 156		<b>Transaction ID : SA11AI.4188</b>	
City Mulberry	State IN	Zip Code 46058	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer	Occupation	Amount of Each Receipt this Period 250.00	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	Amount of Each Receipt this Period 250.00	
<b>SUBTOTAL</b> of Receipts This Page (optional).....		750.00	
<b>TOTAL</b> This Period (last page this line number only).....		7489.12	

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 14

<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)  
**John Dale for Congress**

Full Name (Last, First, Middle Initial)

**IBEW PAC Voluntary Fund**

Mailing Address 900 7th Street NW

City

Washington DC

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

C

C00250324

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	04	/	2014

Transaction ID : SA11C.4238

Amount of Each Receipt this Period

500.00

**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  
☐ Other (specify)
☐ General

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  
☐ Other (specify)
☐ General

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).....

500.00

500.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 14

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

John Dale for Congress

Full Name (Last, First, Middle Initial)

**A. Ms Adi Ben-Yehoshua**

Mailing Address 1520 Summit Drive

City	State	Zip Code
West Lafayette	IN	47906

Purpose of Disbursement  
payment for services

Candidate Name

John Dale for Congress

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: IN District: 04

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		17		2014

Amount of Each Disbursement this Period

350.00
--------

Transaction ID : SB17.4319

**B. JOHN DALE**

Mailing Address 9815 W 510 S

City	State	Zip Code
WESTPOINT	IN	47992

Purpose of Disbursement  
In-kind - Rent for Campaign Headquarters

Candidate Name

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: IN District: 04

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2014

Amount of Each Disbursement this Period

1000.00
---------

Transaction ID : SB17.4237

**C. JOHN DALE**

Mailing Address 9815 W 510 S

City	State	Zip Code
WESTPOINT	IN	47992

Purpose of Disbursement  
In-kind -

Candidate Name

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: IN District: 04

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		01		2014

Amount of Each Disbursement this Period

1000.00
---------

Transaction ID : SB17.4236

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

2350.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 14

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

John Dale for Congress

Full Name (Last, First, Middle Initial)

**A. Humphry Printing**

Mailing Address 315 N.Main Street

City	State	Zip Code
Kokomo	IN	46901

Purpose of Disbursement  
printing cards, envelopes

006

Category/  
Type

Candidate Name

John Dale for Congress

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: IN District: 04

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		29		2014

Amount of Each Disbursement this Period

1842.17
---------

Transaction ID : SB17.4291

**B. Humphry Printing**

Mailing Address 315 N.Main Street

City	State	Zip Code
Kokomo	IN	46901

Purpose of Disbursement  
printing

006

Category/  
Type

Candidate Name

John Dale for Congress

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: IN District: 04

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		29		2014

Amount of Each Disbursement this Period

1050.74
---------

Transaction ID : SB17.4326

**c. JC Printing and mailing services**

Mailing Address 3711 Piney Grove Drive

City	State	Zip Code
Lafayette	IN	47905

Purpose of Disbursement  
In-kind - mailing servicesCategory/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		17		2014

Amount of Each Disbursement this Period

469.12
--------

Transaction ID : SB17.4284

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

3362.03

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 14

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

John Dale for Congress

Full Name (Last, First, Middle Initial)

**A. Ms Kaitlin Naughton**

Mailing Address 2222 Willowbanks Drive, Apt. 173

Date of Disbursement

M M / D D / Y Y Y Y
06 / 17 / 2014

City	State	Zip Code
West Lafayette	IN	47906

Amount of Each Disbursement this Period

\$	350.00
----	--------

Transaction ID : SB17.4317

Purpose of Disbursement  
payment for services

001

Category/  
Type

Candidate Name

John Dale for Congress

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: IN District: 04

Full Name (Last, First, Middle Initial)

**B. Mr. Redd Clark Redd**

Mailing Address 609 B Main Street

Date of Disbursement

M M / D D / Y Y Y Y
05 / 19 / 2014

City	State	Zip Code
Lafayette	IN	47901

Amount of Each Disbursement this Period

\$	500.00
----	--------

Transaction ID : SB17.4304

Purpose of Disbursement  
payment for services

001

Category/  
Type

Candidate Name

John Dale for Congress

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: IN District: 04

Full Name (Last, First, Middle Initial)

**C. Mr. Redd Clark Redd**

Mailing Address 609 B Main Street

Date of Disbursement

M M / D D / Y Y Y Y
06 / 17 / 2014

City	State	Zip Code
Lafayette	IN	47901

Amount of Each Disbursement this Period

\$	800.00
----	--------

Transaction ID : SB17.4321

Purpose of Disbursement  
payment for servicesCategory/  
Type

Candidate Name

John Dale for Congress

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: IN District: 04

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

1650.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 14

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

John Dale for Congress

Full Name (Last, First, Middle Initial)

**A. Smit-Tee**

Mailing Address 731 W., 350 N.

City	State	Zip Code
Thorntown	IN	46070

Purpose of Disbursement  
campaign t-shirts

006

Category/  
Type

Candidate Name

John Dale for Congress

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: IN District: 04

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		29		2014

Amount of Each Disbursement this Period

150.00
--------

Transaction ID : SB17.4323

**B. TDS**

Mailing Address P.O. Box 94510

City	State	Zip Code
Palatine	IL	60094

Purpose of Disbursement  
telephone and internet services

001

Category/  
Type

Candidate Name

John Dale for Congress

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: IN District: 04

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		29		2014

Amount of Each Disbursement this Period

204.48
--------

Transaction ID : SB17.4324

**c. Tippecanoe County Democrat Party**

Mailing Address 1824 Vinton Street

City	State	Zip Code
Lafayette	IN	47904

Purpose of Disbursement  
delgate fees for state convention

007

Category/  
Type

Candidate Name

John Dale for Congress

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: IN District: 04

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		06		2014

Amount of Each Disbursement this Period

210.00
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Transaction ID : SB17.4309

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

564.48

7926.51