

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

FRIENDS OF LIZ BROWN INC.

ADDRESS (number and street) ▼

PO BOX 15114

Check if different than previously reported. (ACC)

FORT WAYNE

IN

46885

2. **FEC IDENTIFICATION NUMBER** ▼

C C00578328

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)

Termination Report (TER)

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

- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12S)

Election on / / in the State of

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

- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period

/ /

through

/ /

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 Christopher M Marston

Signature of Treasurer Christopher M Marston

[Electronically Filed]

Date

/ /

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								
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SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name
FRIENDS OF LIZ BROWN INC.

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

	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))....	52775.00	241615.48
(b) Total Contribution Refunds (from Line 20(d))	800.00	2800.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	51975.00	238815.48
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	31292.75	70646.24
(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)).....	31292.75	70646.24
8. Cash on Hand at Close of Reporting Period (from Line 27).....	167409.24	
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).....	100.00	

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)

Write or Type Committee Name

FRIENDS OF LIZ BROWN INC.

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 01 / 2015 To: M M / D D / Y Y Y Y 12 / 31 / 2015

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).....	53075.00	158298.00
(ii) Unitemized.....	-300.00	5765.00
(iii) TOTAL of contributions from individuals ▶	52775.00	164063.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	2050.00
(d) The Candidate.....	0.00	75502.48
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	52775.00	241615.48
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	100.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	100.00
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)..... ▶	52775.00	241715.48

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	31292.75	70646.24
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	550.00	2550.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	250.00	250.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	800.00	2800.00
21. OTHER DISBURSEMENTS	0.00	860.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	32092.75	74306.24

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	146726.99
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	52775.00
25. SUBTOTAL (add Line 23 and Line 24).....	199501.99
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	32092.75
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	167409.24

**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 71
	<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 LIZ BROWN INC.

Full Name (Last, First, Middle Initial) A. Mary Ryan Amato		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 27 / 2015
Mailing Address 1701 Walnut Ave		Transaction ID : SA11AI.4746
City Wilmette	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer College Counseling Consultants	Occupation College Counselor	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 100.00	

Full Name (Last, First, Middle Initial) B. Anthony Wayne Credit Adjusters, Inc.		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 24 / 2015
Mailing Address 809 S. Calhoun St.		Transaction ID : SA11AI.4813
City Fort Wayne	State IN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer	Occupation	Corporate Contribution - To Be Refunded 2016Q1
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 150.00	

Full Name (Last, First, Middle Initial) C. Justin E Arata		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 24 / 2015
Mailing Address 4321 Taylor Rd		Transaction ID : SA11AI.4874
City Fort Wayne	State IN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer NA	Occupation Retired	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	400.00
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: (check only one)	PAGE 6 OF 71
	<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 LIZ BROWN INC.

A. Full Name (Last, First, Middle Initial)
Auto Collision Service, LLC

Mailing Address 5717 W. Jefferson Blvd.

City Fort Wayne State IN Zip Code 46804

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2015

Transaction ID : SA11AI.4885

Amount of Each Receipt this Period
 150.00

LLC Attribution Requested

B. Full Name (Last, First, Middle Initial)
Dan Bathon

Mailing Address 52 Waltham St

City Lexington State MA Zip Code 02421

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

Name of Employer Occupation
 VineBrook Homes CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : SA11AI.4993

Amount of Each Receipt this Period
 250.00

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

Mailing Address 2277 Pointe Pl.

City Cincinnati State OH Zip Code 45244

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

Name of Employer Occupation
 J. Hillburn Men's Clothier Style Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2015

Transaction ID : SA11AI.4889

Amount of Each Receipt this Period
 250.00

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

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

650.00

**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 71
	<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 LIZ BROWN INC.

A. Full Name (Last, First, Middle Initial)
Susan Bathon

Mailing Address 2277 Pointe Pl.

City State Zip Code
Cincinnati OH 45244

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

Name of Employer Occupation
J. Hillburn Men's Clothier Style Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 28 / 2015

Transaction ID : SA11AI.4890

Amount of Each Receipt this Period
250.00

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

Mailing Address 1206 E. Dupont Rd

City State Zip Code
Fort Wayne IN 46825

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

Name of Employer Occupation
Roth Wehrly Graber Real Estate

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 24 / 2015

Transaction ID : SA11AI.4807

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Joel Benz

Mailing Address 4517 W Till Rd

City State Zip Code
Fort Wayne IN 46818

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

Name of Employer Occupation
None Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 08 / 2015

Transaction ID : SA11AI.5020

Amount of Each Receipt this Period
100.00

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

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

450.00

**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 8 OF 71
	<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 LIZ BROWN INC.

Full Name (Last, First, Middle Initial) A. Peter Bercovich		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 03 / 2015	
Mailing Address 2250 N Fremont Apt 6 City State Zip Code Chicago IL 60614		Transaction ID : SA11AI.4991	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer AMP Options	Occupation Trader		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 50.00		

Full Name (Last, First, Middle Initial) B. Tim Bice		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 11 / 2015	
Mailing Address 1270 George Bush Blvd City State Zip Code Delray Beach FL 33483		Transaction ID : SA11AI.5007	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Quacker Factory	Occupation Apparel Sales		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) C. Todd P. Briscoe DDS		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 24 / 2015	
Mailing Address 7833 St. Joe Center Rd. City State Zip Code Fort Wayne IN 46835		Transaction ID : SA11AI.4802	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00	
Name of Employer Self	Occupation DDS		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

SUBTOTAL of Receipts This Page (optional).....	600.00
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: (check only one)	PAGE 9 OF 71
	<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 LIZ BROWN INC.

A. Full Name (Last, First, Middle Initial)
Andrew F. Brooks

Mailing Address P.O. Box 9015

City Fort Wayne State IN Zip Code 46899

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

Name of Employer Brooks Construction Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11AI.4823

Amount of Each Receipt this Period
 100.00

B. Full Name (Last, First, Middle Initial)
Frederick Bruggemann

Mailing Address 3420 Eggeman Rd.

City Fort Wayne State IN Zip Code 46814

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

Name of Employer Self Occupation Writer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11AI.4841

Amount of Each Receipt this Period
 100.00

C. Full Name (Last, First, Middle Initial)
Kevin M Burns

Mailing Address 8010 Inverness Lakes Trl

City Fort Wayne State IN Zip Code 46804

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

Name of Employer DeHayes Group LLC Occupation Partner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11AI.4818

Amount of Each Receipt this Period
 150.00

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

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

350.00

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

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

FOR LINE NUMBER: PAGE 10 OF 71
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF LIZ BROWN INC.

A. Full Name (Last, First, Middle Initial)
Stacey Bushey

Mailing Address 9506 Sugar Mill Dr.

City Ft. Wayne State IN Zip Code 46935

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

Name of Employer Contract Interiors Inc. Occupation Sales

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11AI.4878

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Martin J. Carbaugh

Mailing Address 1118 Skyline Pass

City Fort Wayne State IN Zip Code 46825

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

Name of Employer Tradewell Financial Occupation Financial Advisor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **100.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11AI.4863

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Daniel Carteaux

Mailing Address 9714 Stowaway Cove

City Fort Wayne State IN Zip Code 46835

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

Name of Employer EZ Cut Tool LLC Occupation Co-Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **100.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 18 / 2015

Transaction ID : SA11AI.4985

Amount of Each Receipt this Period
100.00

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

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

1200.00

**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 11b 11c 11d
 12 13a 13b 14 15
 PAGE 11 OF 71

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NAME OF COMMITTEE (In Full)
FRIENDS OF LIZ BROWN INC.

A. Full Name (Last, First, Middle Initial)
Christopher M. Ciocca

Mailing Address 10227 Chambord Knoll

City State Zip Code
 Fort Wayne IN 46835

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

Name of Employer Occupation
 Ciocca Cleaning & Restoration Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 24 2015

Transaction ID : SA11AI.4843

Amount of Each Receipt this Period
 300.00

B. Full Name (Last, First, Middle Initial)
Tom Current

Mailing Address 2120 East Washington Blvd

City State Zip Code
 Fort Wayne IN 46803

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

Name of Employer Occupation
 Current Mechanical Mechanical Contractor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 06 2015

Transaction ID : SA11AI.5000

Amount of Each Receipt this Period
 100.00

C. Full Name (Last, First, Middle Initial)
Michael W. Cusick

Mailing Address 320 E 21st St
 Unit 605

City State Zip Code
 Chicago IL 60616

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

Name of Employer Occupation
 Clarity Parnters LLC Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 05 2015

Transaction ID : SA11AI.4736

Amount of Each Receipt this Period
 250.00

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

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

650.00

**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 71
	<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 LIZ BROWN INC.

Full Name (Last, First, Middle Initial) A. Edward M. Dahm		Date of Receipt M M / D D / Y Y Y Y Y 12 / 24 / 2015	
Mailing Address 1310 E State		Transaction ID : SA11AI.4873	
City Fort Wayne	State IN	Zip Code 46805	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 100.00	
Name of Employer None	Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 450.00		

Full Name (Last, First, Middle Initial) B. Patrick J. Daley		Date of Receipt M M / D D / Y Y Y Y Y 10 / 13 / 2015	
Mailing Address 4808 Union Chapel Rd		Transaction ID : SA11AI.4765	
City Fort Wayne	State IN	Zip Code 46845	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 500.00	
Name of Employer Parkview Physicians Group	Occupation Physician		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) C. Erica D. Dekko		Date of Receipt M M / D D / Y Y Y Y Y 12 / 24 / 2015	
Mailing Address 1210 Lakeside Dr.		Transaction ID : SA11AI.4835	
City Kendallville	State IN	Zip Code 46755	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 100.00	
Name of Employer Self	Occupation Financial Advisor		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 100.00		

SUBTOTAL of Receipts This Page (optional).....	700.00
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 13 OF 71
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF LIZ BROWN INC.

A. Full Name (Last, First, Middle Initial)
Greg Delong

Mailing Address 6210 W. Hamilton Rd. S

City Fort Wayne State IN Zip Code 46814

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

Name of Employer Shar Systems Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11AI.4782

Amount of Each Receipt this Period
 300.00

B. Full Name (Last, First, Middle Initial)
Janet K. Didier

Mailing Address 1811 Old Lantern Trail

City Fort Wayne State IN Zip Code 46845

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

Name of Employer Didier Meats Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11AI.4787

Amount of Each Receipt this Period
 500.00

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

Mailing Address 1418 N Lake Shore Dr #26

City Chicago State IL Zip Code 60610

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

Name of Employer McNabb, LLC. Occupation Founder

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : SA11AI.5032

Amount of Each Receipt this Period
 500.00

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: PAGE 14 OF 71
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF LIZ BROWN INC.

A. Full Name (Last, First, Middle Initial)
David Dolezal

Mailing Address 7121 E. 300 S.

City Avilla State IN Zip Code 46710

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

Name of Employer Noble County Occupation Commissioner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11AI.4865

Amount of Each Receipt this Period
 50.00

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

Mailing Address 2010 Prestwick Lane

City Fort Wayne State IN Zip Code 46814

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

Name of Employer None Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11AI.4880

Amount of Each Receipt this Period
 500.00

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

Mailing Address 15023 Remington Pl.

City Fort Wayne State IN Zip Code 46814

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

Name of Employer Don Ayres Honda Occupation General Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11AI.4791

Amount of Each Receipt this Period
 300.00

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

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

850.00

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

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

FOR LINE NUMBER: PAGE 15 OF 71
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF LIZ BROWN INC.

A. Full Name (Last, First, Middle Initial)
Terrence W. Dunne

Mailing Address 4207 Woodland Ave.

City State Zip Code
Western Springs IL 60558

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

Name of Employer Occupation
Millennium Trust Company Managing Director

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.4905

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Raymond E. Dusman MD

Mailing Address 2109 Turnberry Ln.

City State Zip Code
Fort Wayne IN 46814

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

Name of Employer Occupation
Parkview Physicians Group Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11AI.4793

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Don Effinger

Mailing Address 6315 Hursh Rd

City State Zip Code
Fort Wayne IN 46845

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

Name of Employer Occupation
Anthony Wayne Credit Adjusters Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
150.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 05 / 2015

Transaction ID : SA11AI.4754

Amount of Each Receipt this Period
150.00

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

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

1400.00

**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 71
	<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 LIZ BROWN INC.

Full Name (Last, First, Middle Initial) A. Paul Eisaman		Date of Receipt M M / D D / Y Y Y Y Y 10 / 29 / 2015	
Mailing Address 2109 S Calhoun St		Transaction ID : SA11AI.4989	
City Fort Wqayne	State IN	Zip Code 46802	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Eisaman Property Management	Occupation President		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00		

Full Name (Last, First, Middle Initial) B. Sharon Eisbart		Date of Receipt M M / D D / Y Y Y Y Y 12 / 24 / 2015	
Mailing Address 4235 Reservation Trail		Transaction ID : SA11AI.4861	
City Fort Wayne	State IN	Zip Code 46814	Amount of Each Receipt this Period _____ 150.00
FEC ID number of contributing federal political committee. C			
Name of Employer Sharon Eisbart Corporate Art	Occupation President		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 150.00		

Full Name (Last, First, Middle Initial) C. Denis Ellis		Date of Receipt M M / D D / Y Y Y Y Y 12 / 31 / 2015	
Mailing Address 8311 Sagimore Court		Transaction ID : SA11AI.5037	
City Fort Wayne	State IN	Zip Code 46835	Amount of Each Receipt this Period _____ 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer None	Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 25.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 675.00
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 17 OF 71
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF LIZ BROWN INC.

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

Mailing Address 8106 Sorrel Lane

City State Zip Code
Ft. Wayne IN 46825

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

Name of Employer Occupation
Sanofi Senior National Account Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11AI.4870

Amount of Each Receipt this Period
300.00

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

Mailing Address 8106 Sorrel Lane

City State Zip Code
Ft. Wayne IN 46825

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

Name of Employer Occupation
Sanofi Senior National Account Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
650.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : SA11AI.5033

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Erie Haven, Inc.

Mailing Address 6300 Ardmore Ave.

City State Zip Code
Fort Wayne IN 46809

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11AI.4817

Amount of Each Receipt this Period
100.00
Corporate Contribution - To Be Refunded 2016Q1

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: PAGE 18 OF 71
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF LIZ BROWN INC.

A. Full Name (Last, First, Middle Initial)
Kevin K. Fitzharris

Mailing Address 8531 Castle Creek Dr.

City Fort Wayne State IN Zip Code 46804

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

Name of Employer Barrett & McNagny Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.4908

Amount of Each Receipt this Period
 100.00

B. Full Name (Last, First, Middle Initial)
Henry D. Freistroffer Jr.

Mailing Address 1420 Swinney Ct

City Fort Wayne State IN Zip Code 46802

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

Name of Employer Craftline Printing Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : SA11AI.4734

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Tom Freistroffer

Mailing Address 1084 Pemberton Dr

City Fort Wayne State IN Zip Code 46805

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

Name of Employer Freistroffer Appraisal Service Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 28 / 2015

Transaction ID : SA11AI.4887

Amount of Each Receipt this Period
 200.00

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: PAGE 19 OF 71
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF LIZ BROWN INC.

A. Full Name (Last, First, Middle Initial)
Friends of Darren Vogt for Senate

Mailing Address 2030 Forest Glade

City State Zip Code
Fort Wayne IN 46845

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 24 2015

Transaction ID : SA11AI.4855

Amount of Each Receipt this Period
 500.00

Acceptable Funds Verified

B. Full Name (Last, First, Middle Initial)
Friends of Doug Eckerty

Mailing Address 7347 S State Rd

City State Zip Code
Lewisville IN 47352

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 09 2015

Transaction ID : SA11AI.4762

Amount of Each Receipt this Period
 1000.00

Acceptable Funds Verified

C. Full Name (Last, First, Middle Initial)
Friends of Tom Wyss Committee

Mailing Address 12133 Harvest Bay Dr

City State Zip Code
Fort Wayne IN 46845

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 14 2015

Transaction ID : SA11AI.5043

Amount of Each Receipt this Period
 500.00

Acceptable Funds Verified

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

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

2000.00

**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 71
	<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 LIZ BROWN INC.

A. Full Name (Last, First, Middle Initial)
Dawn A. Gallaway

Mailing Address 17908 West Rd.

City: **Huntertown** State: **IN** Zip Code: **46748**

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

Name of Employer: **Keller Development** Occupation: **Executive**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: **500.00**

Date of Receipt: **12 / 24 / 2015**

Transaction ID : SA11AI.4785

Amount of Each Receipt this Period: **500.00**

B. Full Name (Last, First, Middle Initial)
James Getz

Mailing Address 355 Lane 130A Lake George

City: **Fremont** State: **IN** Zip Code: **46737**

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

Name of Employer: **AZZ Galvanizing** Occupation: **Sales Manager**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: **250.00**

Date of Receipt: **12 / 24 / 2015**

Transaction ID : SA11AI.4851

Amount of Each Receipt this Period: **250.00**

C. Full Name (Last, First, Middle Initial)
Edward J. Gillig

Mailing Address 4226 Tifton Ct.

City: **Fort Wayne** State: **IN** Zip Code: **46835**

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

Name of Employer: **Premier Auto, Inc.** Occupation: **Owner**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: **300.00**

Date of Receipt: **12 / 24 / 2015**

Transaction ID : SA11AI.4867

Amount of Each Receipt this Period: **300.00**

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

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

1050.00

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

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

FOR LINE NUMBER: PAGE 21 OF 71
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF LIZ BROWN INC.

A. Full Name (Last, First, Middle Initial)
Mark R. Goodman

Mailing Address 107 Moffett Rd

City State Zip Code
Lake Bluff IL 60044

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

Name of Employer Occupation
Freeborn & Peters LLP Partner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2015

Transaction ID : SA11AI.4711

Amount of Each Receipt this Period
500.00

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

Mailing Address 4115 W. Jefferson Blvd.

City State Zip Code
Fort Wayne IN 46804

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

Name of Employer Occupation
Sigma Financial Corporation Finance

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
150.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11AI.4825

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
Julie K. Griffith

Mailing Address 3552 Town Drive

City State Zip Code
Carmel IN 46032

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

Name of Employer Occupation
Purdue University VP of Government Affairs

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11AI.4789

Amount of Each Receipt this Period
250.00

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

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

900.00

**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 71
	<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 LIZ BROWN INC.

Full Name (Last, First, Middle Initial) A. Nick Groves		Date of Receipt M M / D D / Y Y Y Y Y 11 / 06 / 2015	
Mailing Address 5529 Trishlyn Cove		Transaction ID : SA11AI.5002	
City Fort Wayne	State IN	Zip Code 46835	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00	
Name of Employer The DeHayes Group	Occupation Insurance		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 15.00		

Full Name (Last, First, Middle Initial) B. John C. Hahn		Date of Receipt M M / D D / Y Y Y Y Y 12 / 24 / 2015	
Mailing Address 4 Cresswell Gardens		Transaction ID : SA11AI.4799	
City London SW5 OBJ, England	State ZZ	Zip Code 11111	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Providence Equity	Occupation Senior Managing Director		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) C. William H. Hanzlik		Date of Receipt M M / D D / Y Y Y Y Y 11 / 05 / 2015	
Mailing Address 5701 Green Oaks Dr.		Transaction ID : SA11AI.4726	
City Greenwood Village	State CO	Zip Code 80121	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Gold Crown Foundation	Occupation CEL		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 100.00		

SUBTOTAL of Receipts This Page (optional).....	615.00
TOTAL This Period (last page this line number only).....	615.00

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

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

FOR LINE NUMBER: PAGE 23 OF 71
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF LIZ BROWN INC.

A. Full Name (Last, First, Middle Initial)
Tina M. Helmuth

Mailing Address 6670 S 715 W
PO Box 35

City State Zip Code
Topeka IN 46571

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

Name of Employer Occupation
S&H Metal Products Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2015

Transaction ID : SA11AI.4730

Amount of Each Receipt this Period
250.00

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

Mailing Address 711 Ramblin Road

City State Zip Code
Greenwood IN 46142

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

Name of Employer Occupation
None Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
25.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2015

Transaction ID : SA11AI.4995

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Patrick Hess

Mailing Address 201 West Wayne St.

City State Zip Code
Fort Wayne IN 46802

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

Name of Employer Occupation
Beckman Lawson, LLP Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11AI.4804

Amount of Each Receipt this Period
300.00

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

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

575.00

**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 71
	<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 LIZ BROWN INC.

A. Full Name (Last, First, Middle Initial)
Travis Holdman

Mailing Address 2467 W. 1000 Pl.

City Markle State IN Zip Code 46770

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

Name of Employer Self Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11AI.4859

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Home Builders Association of Fort Wayne - Build Pac

Mailing Address 305 W. Main St.

City Fort Wayne State IN Zip Code 46802

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11AI.4821

Amount of Each Receipt this Period
 200.00

Acceptable Funds Verified

C. Full Name (Last, First, Middle Initial)
Diane L. Hopen MD

Mailing Address 2709 East Dr

City Fort Wayne State IN Zip Code 46805

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

Name of Employer Self Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 05 / 2015

Transaction ID : SA11AI.4752

Amount of Each Receipt this Period
 200.00

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

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

900.00

**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 25 OF 71

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NAME OF COMMITTEE (In Full)
FRIENDS OF LIZ BROWN INC.

A. Full Name (Last, First, Middle Initial)
Diane S. Humphrey

Mailing Address 2279 E 250 N

City Bluffton State IN Zip Code 46714

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

Name of Employer NA Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 07 / 2015

Transaction ID : SA11AI.4758

Amount of Each Receipt this Period
 1500.00

B. Full Name (Last, First, Middle Initial)
Diane S. Humphrey

Mailing Address 2279 E 250 N

City Bluffton State IN Zip Code 46714

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

Name of Employer NA Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11AI.4868

Amount of Each Receipt this Period
 100.00

C. Full Name (Last, First, Middle Initial)
Kathleen M. Hussey

Mailing Address 597 S Stratford Ave

City Elmhurst State IL Zip Code 60126

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

Name of Employer None Occupation Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2015

Transaction ID : SA11AI.4715

Amount of Each Receipt this Period
 500.00

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

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

2100.00

**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 71
	<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 LIZ BROWN INC.

A. Full Name (Last, First, Middle Initial)
Ideal Suburban Homes, Inc.

Mailing Address 522 South 13th St.
P.O. Box 549

City Decatur State IN Zip Code 46733

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11AI.4847

Amount of Each Receipt this Period
500.00

Corporate Contribution - To Be Refunded 2016Q1

B. Full Name (Last, First, Middle Initial)
Jan Sanner & Associates, Inc.

Mailing Address 7920 Coldwater Rd

City Fort Wayne State IN Zip Code 46825

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
150.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2015

Transaction ID : SA11AI.4763

Amount of Each Receipt this Period
150.00

Corporate Contribution - Refunded 12/21, See Sch. B Line 20(a)

C. Full Name (Last, First, Middle Initial)
Marna Johnson

Mailing Address 914 E Gump Rd

City Fort Wayne State IN Zip Code 46845

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

Name of Employer Occupation
None Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : SA11AI.5030

Amount of Each Receipt this Period
250.00

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

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

900.00

**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 27 OF 71
	<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 LIZ BROWN INC.

A. Full Name (Last, First, Middle Initial)
Steve Justus

Mailing Address 401 McBarnes Apt. 1

City Decatur State IN Zip Code 46733

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

Name of Employer Fort Wayne Community Schools Occupation Teacher

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **248.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 06 / 2015

Transaction ID : SA11AI.5003

Amount of Each Receipt this Period
25.00

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

Mailing Address 401 McBarnes Apt. 1

City Decatur State IN Zip Code 46733

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

Name of Employer Fort Wayne Community Schools Occupation Teacher

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **283.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 20 / 2015

Transaction ID : SA11AI.5016

Amount of Each Receipt this Period
35.00

C. Full Name (Last, First, Middle Initial)
William J. Kresse

Mailing Address 10221 S California Ave

City Chicago State IL Zip Code 60655

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

Name of Employer Governor's State University Occupation Professor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **100.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2015

Transaction ID : SA11AI.4717

Amount of Each Receipt this Period
100.00

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

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

160.00

**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 71
	<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 LIZ BROWN INC.

Full Name (Last, First, Middle Initial) A. Debra K. Kunkle		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 13 / 2015	
Mailing Address 8318 Fawncrest Pl		Transaction ID : SA11AI.4767	
City Fort Wayne	State IN	Zip Code 46835	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00	
Name of Employer Dupont Hospital	Occupation RN		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 150.00		

Full Name (Last, First, Middle Initial) B. Lancia Homes		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 24 / 2015	
Mailing Address 9430 Lima Rd. Ste. A		Transaction ID : SA11AI.4845	
City Fort Wayne	State IN	Zip Code 46818	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00	
Name of Employer	Occupation		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) C. Beth A Larocca		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 23 / 2015	
Mailing Address 753 Argyle Ave		Transaction ID : SA11AI.4699	
City Flossmoor	State IL	Zip Code 60422	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00	
Name of Employer Glenbard District 87	Occupation Teacher		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 150.00		

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	600.00

**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 71
	<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 LIZ BROWN INC.

A. Full Name (Last, First, Middle Initial)
Leo J. Latz

Mailing Address 1101 South Blvd
Unit 205

City State Zip Code
Oak Park IL 60302

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

Name of Employer Occupation
Latz & Wall Managing Partner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 05 / 2015

Transaction ID : SA11AI.4720

Amount of Each Receipt this Period
100.00

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

Mailing Address 10333 Vermilyea Pass

City State Zip Code
Fort Wayne IN 46804

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

Name of Employer Occupation
Beckman Lawson Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 24 / 2015

Transaction ID : SA11AI.4810

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
F.L. Dennis Logan

Mailing Address 1916 Carvers bay Run

City State Zip Code
Fort Wayne IN 46845

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

Name of Employer Occupation
Rothberg Logan & Warsco Partner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 18 / 2015

Transaction ID : SA11AI.4769

Amount of Each Receipt this Period
100.00

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

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

300.00

**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 71
	<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 LIZ BROWN INC.

A. Full Name (Last, First, Middle Initial)
Maria Etling Real Estate Inc.

Mailing Address 100 N Milwaukee Ave

City State Zip Code
Libertyville IL 60048

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
150.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 25 / 2015

Transaction ID : SA11AI.4745

Amount of Each Receipt this Period
150.00

Corporate Contribution - Refunded 12/21, See Sch. B Line 20(a)

B. Full Name (Last, First, Middle Initial)
Maria Etling Real Estate Inc.

Mailing Address 100 N Milwaukee Ave

City State Zip Code
Libertyville IL 60048

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 07 / 2015

Transaction ID : SA11AI.4743

Amount of Each Receipt this Period
250.00

Corporate Contribution - Refunded 12/21, See Sch. B Line 20(a)

C. Full Name (Last, First, Middle Initial)
Martin Maringer

Mailing Address 140 Lane 205B Jimmerson Lake

City State Zip Code
Angola IN 46703

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

Name of Employer Occupation
Patmar Properties LLC Real Estate

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 28 / 2015

Transaction ID : SA11AI.4883

Amount of Each Receipt this Period
100.00

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 31 OF 71
	<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 LIZ BROWN INC.

A. Full Name (Last, First, Middle Initial)
Michael J. Mastrangelo MD

Mailing Address 7100 W Hamilton Rd S

City Fort Wayne State IN Zip Code 46814

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

Name of Employer None Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2950.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11AI.4811

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Stacey Miles

Mailing Address 15812 Weston Glen

City Huntertown State IN Zip Code 46748

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

Name of Employer None Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 05 / 2015

Transaction ID : SA11AI.4983

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Dr. Michael W. Mitchell

Mailing Address 2216 River Woods Dr

City Naperville State IL Zip Code 60565

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

Name of Employer Naperville Radiologists Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : SA11AI.4722

Amount of Each Receipt this Period
500.00

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

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

1100.00

**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 71
	<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 LIZ BROWN INC.

Full Name (Last, First, Middle Initial) A. Lisa K. Momper		Date of Receipt M M / D D / Y Y Y Y 12 / 24 / 2015	
Mailing Address 4702 Wyndemere Ln		Transaction ID : SA11AI.4819	
City Fort Wayne	State IN	Zip Code 46835	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Momper Insulation	Occupation Owner		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00		

Full Name (Last, First, Middle Initial) B. Lisa K. Momper		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2015	
Mailing Address 4702 Wyndemere Ln		Transaction ID : SA11AI.4909	
City Fort Wayne	State IN	Zip Code 46835	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 800.00	
Name of Employer Momper Insulation	Occupation Owner		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2300.00		

Full Name (Last, First, Middle Initial) C. Randy O'Daniel		Date of Receipt M M / D D / Y Y Y Y 12 / 24 / 2015	
Mailing Address 9606 Hera Ct		Transaction ID : SA11AI.4869	
City Fort Wayne	State IN	Zip Code 46825	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer O'Daniel Auto Sales	Occupation owner		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1150.00		

SUBTOTAL of Receipts This Page (optional).....	2800.00
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: (check only one)	PAGE 33 OF 71
	<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 LIZ BROWN INC.

A. Full Name (Last, First, Middle Initial)
Sheila ODaniel

Mailing Address 17106 Coldwater Road

City State Zip Code
Huntertown IN 46748

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

Name of Employer Occupation
None Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
50.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 13 / 2015

Transaction ID : SA11AI.5015

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Rex A. Peters

Mailing Address 2720 Dupont Commerce Ct.
IBM Corp., Ste. 110

City State Zip Code
Fort Wayne IN 46825

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

Name of Employer Occupation
IBM Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11AI.4872

Amount of Each Receipt this Period
250.00

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

Mailing Address 3025 Covington Manor Rd

City State Zip Code
Fort Wayne IN 46814

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

Name of Employer Occupation
Phillips Financial Financial Planner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2015

Transaction ID : SA11AI.4987

Amount of Each Receipt this Period
250.00

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

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

550.00

**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 71
	<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 LIZ BROWN INC.

A. Full Name (Last, First, Middle Initial)
Joseph G. Pierce

Mailing Address P.O. Box 183

City Lagrange State IN Zip Code 46761

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

Name of Employer Farmers State Bank Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11AI.4877

Amount of Each Receipt this Period
 300.00

B. Full Name (Last, First, Middle Initial)
Ricard A Poinatte

Mailing Address 1840 Florida Dr

City Fort Wayne State IN Zip Code 46805

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

Name of Employer SDI Occupation executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11AI.4852

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Camille Pond

Mailing Address 5730 Autumn Woods Trail

City Fort Wayne State IN Zip Code 46835

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

Name of Employer None Occupation Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.4906

Amount of Each Receipt this Period
 300.00

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

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

1600.00

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

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

FOR LINE NUMBER: PAGE 35 OF 71
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF LIZ BROWN INC.

A. Full Name (Last, First, Middle Initial)
Primesource Marketing, Inc.

Mailing Address 1160 Elkhorn Dr.

City State Zip Code
Blacklick OH 43004

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2015

Transaction ID : SA11AI.4892

Amount of Each Receipt this Period
 100.00

Corporate Contribution - To Be Refunded 2016Q1

B. Full Name (Last, First, Middle Initial)
Thomas R. Quick

Mailing Address 9765 E 645 S

City State Zip Code
Wolcottville IN 46795

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

Name of Employer Occupation
Quick Tanks Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2015

Transaction ID : SA11AI.4899

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Michael A. Rasor

Mailing Address 8745 Heatherstone Pl

City State Zip Code
Zionsville IN 46077

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

Name of Employer Occupation
LM Henderson & Company LLP Partner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2015

Transaction ID : SA11AI.4728

Amount of Each Receipt this Period
 250.00

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

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

850.00

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

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

FOR LINE NUMBER: PAGE 36 OF 71
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF LIZ BROWN INC.

A. Full Name (Last, First, Middle Initial)
Mark A. Resnshaw

Mailing Address 11818 Woodstream Ridge Ct

City Ft Wayne State IN Zip Code 46845

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

Name of Employer Ophthalmology Consultants of Ft Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2015

Transaction ID : SA11AI.4701

Amount of Each Receipt this Period
 200.00

B. Full Name (Last, First, Middle Initial)
Paul Reszel

Mailing Address 1618 Autumn Run

City Fort Wayne State IN Zip Code 46845

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

Name of Employer None Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 24 / 2015

Transaction ID : SA11AI.4988

Amount of Each Receipt this Period
 25.00

C. Full Name (Last, First, Middle Initial)
Paul Reszel

Mailing Address 1618 Autumn Run

City Fort Wayne State IN Zip Code 46845

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

Name of Employer None Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 24 / 2015

Transaction ID : SA11AI.5017

Amount of Each Receipt this Period
 25.00

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

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

250.00

**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 71
	<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 LIZ BROWN INC.

Full Name (Last, First, Middle Initial) A. Paul Reszel		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 24 / 2015	
Mailing Address 1618 Autumn Run		Transaction ID : SA11AI.4800	
City Fort Wayne	State IN	Zip Code 46845	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 100.00	
Name of Employer None	Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00		

Full Name (Last, First, Middle Initial) B. Paul Reszel		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 24 / 2015	
Mailing Address 1618 Autumn Run		Transaction ID : SA11AI.5027	
City Fort Wayne	State IN	Zip Code 46845	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 25.00	
Name of Employer None	Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 375.00		

Full Name (Last, First, Middle Initial) C. Renee L. Riecke		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 24 / 2015	
Mailing Address 2515 Knightsbridge Dr		Transaction ID : SA11AI.4853	
City Fort Wayne	State IN	Zip Code 46815	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 100.00	
Name of Employer Barrett & McNagny	Occupation Attorney		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 200.00		

SUBTOTAL of Receipts This Page (optional).....	225.00
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 38 OF 71
(check only one)
 11a 12
 11b 13a
 11c 13b
 11d 14
 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF LIZ BROWN INC.

A. Full Name (Last, First, Middle Initial)
Tracy A. Roach

Mailing Address 4115 Wyndemere Pass

City Fort Wayne State IN Zip Code 46835

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

Name of Employer None Occupation Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 28 / 2015

Transaction ID : SA11AI.4894

Amount of Each Receipt this Period
 1500.00

B. Full Name (Last, First, Middle Initial)
William A Rush

Mailing Address 5150 W Jefferson Blvd

City Fort Wayne State IN Zip Code 46804

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

Name of Employer DeHayes Group Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11AI.4808

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Brenna Christian Ryan

Mailing Address 1174 Spruce St.

City Winnetka State IL Zip Code 60093

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 05 / 2015

Transaction ID : SA11AI.4740

Amount of Each Receipt this Period
 100.00

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

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

2100.00

**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 40 OF 71
	<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 LIZ BROWN INC.

A. Full Name (Last, First, Middle Initial)
Kevin J. Scully

Mailing Address 18232 Tonkel Rd.

City Auburn State IN Zip Code 46707

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

Name of Employer Barrett & McNagny Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11AI.4827

Amount of Each Receipt this Period
 100.00

B. Full Name (Last, First, Middle Initial)
Patricia A Shields

Mailing Address 2813 Woodhollow Trl

City Fort Wayne State IN Zip Code 46825

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

Name of Employer Air Shamrock Occupation Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2015

Transaction ID : SA11AI.4895

Amount of Each Receipt this Period
 4000.00

C. Full Name (Last, First, Middle Initial)
Benjamin D. Shively

Mailing Address 2981 Mediterra Ln

City Fort Wayne State IN Zip Code 46814

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

Name of Employer Lake City Bank Occupation Investment Officer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2015

Transaction ID : SA11AI.4732

Amount of Each Receipt this Period
 100.00

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

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

4200.00

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

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

FOR LINE NUMBER: PAGE 41 OF 71
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF LIZ BROWN INC.

A. Full Name (Last, First, Middle Initial)
Tonya J. Shupe

Mailing Address 6309 Cherry Hill Parkway

City Fort Wayne State IN Zip Code 46835

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

Name of Employer None Occupation Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11AI.4875

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Laura Sievers

Mailing Address 622 W Columbia Pkwy

City Columbia City State IN Zip Code 46725

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

Name of Employer North Eastern Group Occupation CFO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 22 / 2015

Transaction ID : SA11AI.4703

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Thomas Simons

Mailing Address 7501 E. 1100 N

City Kendallville State IN Zip Code 46755

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

Name of Employer None Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 28 / 2015

Transaction ID : SA11AI.4897

Amount of Each Receipt this Period
250.00

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

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

1250.00

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

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

FOR LINE NUMBER: PAGE 42 OF 71
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF LIZ BROWN INC.

A. Full Name (Last, First, Middle Initial)
Connie K. Slyby DDS

Mailing Address 5645 Reed Rd.

City Fort Wayne State IN Zip Code 46835

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

Name of Employer None Occupation Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11AI.4829

Amount of Each Receipt this Period
 300.00

B. Full Name (Last, First, Middle Initial)
Steamatic of Fort Wayne, Inc.

Mailing Address 1220 Edsall Ave.

City Fort Wayne State IN Zip Code 46803

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11AI.4806

Amount of Each Receipt this Period
 100.00

Corporate Contribution - To Be Refunded 2016Q1

C. Full Name (Last, First, Middle Initial)
Mark R. Stetzel DDS

Mailing Address 4321 Woodbriar Pass

City Fort Wayne State IN Zip Code 46835

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

Name of Employer Self Occupation DDS

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11AI.4797

Amount of Each Receipt this Period
 300.00

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

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

700.00

**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 71
	<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 LIZ BROWN INC.

A. Full Name (Last, First, Middle Initial)
Anthony M. Stites

Mailing Address 7501 Brush College Rd.

City Woodburn State IN Zip Code 46797

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

Name of Employer Barrett & McNagny Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11AI.4831

Amount of Each Receipt this Period
 200.00

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

Mailing Address 8502 Cherokee Pl

City Leawood State KS Zip Code 66206

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

Name of Employer KC Urology Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2015

Transaction ID : SA11AI.4748

Amount of Each Receipt this Period
 100.00

C. Full Name (Last, First, Middle Initial)
Mike Stronczek

Mailing Address 4220 Old Mill Road

City Fort Wayne State IN Zip Code 46807

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

Name of Employer OMSA Occupation Oral Surgeon

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2015

Transaction ID : SA11AI.4997

Amount of Each Receipt this Period
 25.00

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

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

325.00

**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 71
	<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 LIZ BROWN INC.

A. Full Name (Last, First, Middle Initial)
Deborah Sturges

Mailing Address 2332 Turnberry Lane

City Fort Wayne State IN Zip Code 46814

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

Name of Employer Hallmark Home Mortgage Occupation Mortgage Banking

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 01 / 2015

Transaction ID : SA11AI.4980

Amount of Each Receipt this Period
 100.00

B. Full Name (Last, First, Middle Initial)
Michael Sweeney

Mailing Address 2865 West US Hwy 224

City Decatur State IN Zip Code 46733

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

Name of Employer Self Occupation Gunsmith

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : SA11AI.5029

Amount of Each Receipt this Period
 50.00

C. Full Name (Last, First, Middle Initial)
Brian T'Kindt

Mailing Address 15126 Pulver Road

City Fort Wayne State IN Zip Code 46845

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

Name of Employer Self Occupation Attorney at law

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.5035

Amount of Each Receipt this Period
 25.00

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

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

175.00

**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 71
	<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 LIZ BROWN INC.

A. Full Name (Last, First, Middle Initial)
Samuel J. Talarico Jr.

Mailing Address 5533 Autumn Woods Tr.

City Fort Wayne State IN Zip Code 46835

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

Name of Employer Barrett & McNagny Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11AI.4857

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
James S. Tambone

Mailing Address 84 Ledgeways

City Wellesley State MA Zip Code 02481

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

Name of Employer Atlantic Tambone Occupation Real Estate

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11AI.4837

Amount of Each Receipt this Period
 150.00

C. Full Name (Last, First, Middle Initial)
Phillip Terry

Mailing Address 7228 S Arlington Ave

City Indianapolis State IN Zip Code 46237

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

Name of Employer Monarch Beverage Co Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 21 / 2015

Transaction ID : SA11AI.5026

Amount of Each Receipt this Period
 500.00

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

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

1150.00

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

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

FOR LINE NUMBER: PAGE 46 OF 71
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF LIZ BROWN INC.

A. Full Name (Last, First, Middle Initial)
Timberlin Homes LLC

Mailing Address P.O. Box 98

City Leo State IN Zip Code 46765

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11AI.4815

Amount of Each Receipt this Period
 300.00

LLC Attribution Requested

B. Full Name (Last, First, Middle Initial)
Fred Toenges

Mailing Address 7735 W Jefferson Blvd

City Fort Wayne State IN Zip Code 46804

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

Name of Employer Occupation
 Prevail P+O Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 15 / 2015

Transaction ID : SA11AI.5024

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Bob Tomlinson

Mailing Address 1124 Ludwig Park Dr

City Fort Wayne State IN Zip Code 46825

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

Name of Employer Occupation
 None Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2015

Transaction ID : SA11AI.4998

Amount of Each Receipt this Period
 50.00

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

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

600.00

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

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

FOR LINE NUMBER: PAGE 47 OF 71
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF LIZ BROWN INC.

A. Full Name (Last, First, Middle Initial)
Cindy Turner

Mailing Address 1060 Borghese Ln Apt 2101

City State Zip Code
Naples FL 34114

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

Name of Employer Occupation
None Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 12 / 2015

Transaction ID : SA11AI.5013

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Keith Turner

Mailing Address 1060 Borghese Ln PH 2101

City State Zip Code
Naples FL 34114

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

Name of Employer Occupation
None Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 14 / 2015

Transaction ID : SA11AI.5022

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
Ronald Turpin

Mailing Address 12608 Puff Rd.

City State Zip Code
Fort Wayne IN 46845

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

Name of Employer Occupation
Ginson Insurance Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11AI.4849

Amount of Each Receipt this Period
100.00

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

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

5400.00

**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 71
	<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 LIZ BROWN INC.

A. Full Name (Last, First, Middle Initial)
Denise VanderHagen

Mailing Address 15525 Talon Ridge Cove

City State Zip Code
Huntertown IN 46748

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

Name of Employer Occupation
None Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 24 / 2015

Transaction ID : SA11AI.4783

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
David Watercutter

Mailing Address 9602 Coldwater Rd #100

City State Zip Code
Fort Wayne IN 46825

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

Name of Employer Occupation
Watercutter Financial Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 28 / 2015

Transaction ID : SA11AI.4881

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Laurence Weigand

Mailing Address 4433 Winding Brook Rd.

City State Zip Code
Fort Wayne IN 46814

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

Name of Employer Occupation
Weigand Construction CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 28 / 2015

Transaction ID : SA11AI.4903

Amount of Each Receipt this Period
350.00

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

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

800.00

**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 71
	<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 LIZ BROWN INC.

A. Full Name (Last, First, Middle Initial)
Thomas R. Weiler

Mailing Address 709 Maple Ave

City Downers Grove State IL Zip Code 60515

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

Name of Employer Langhenry, Gillen, Lunquist & Occupation Partner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2015

Transaction ID : SA11AI.4713

Amount of Each Receipt this Period
 100.00

B. Full Name (Last, First, Middle Initial)
Amy Weisman

Mailing Address 7334 Allenbrook Blvd

City Fort Wayne State IN Zip Code 46835

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

Name of Employer Lake City Bank Occupation Office Manager/Vice President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 12 / 2015

Transaction ID : SA11AI.5011

Amount of Each Receipt this Period
 100.00

C. Full Name (Last, First, Middle Initial)
Gregg F Weisman

Mailing Address 7334 Allenbrook Blvd

City Fort Wayne State IN Zip Code 46835

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

Name of Employer Logikos Inc Occupation Company President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 12 / 2015

Transaction ID : SA11AI.5009

Amount of Each Receipt this Period
 100.00

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

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

300.00

**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 71
	<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 LIZ BROWN INC.

A. Full Name (Last, First, Middle Initial)
Joe Wharton

Mailing Address 7510 Schwartz Rd

City Fort Wayne State IN Zip Code 46835

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

Name of Employer Tippmann Group Occupation General Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **50.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2015

Transaction ID : SA11AI.4996

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Thomas E. White

Mailing Address 12025 Ernst Rd

City Roanoke State IN Zip Code 46783

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

Name of Employer Parkview Physicians Group Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 10 / 2015

Transaction ID : SA11AI.4756

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Leslie H. Williams

Mailing Address 3104 Eggeman Rd

City Fort Wayne State IN Zip Code 46814

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

Name of Employer None Occupation Homemaker

Receipt For: 2015
 Primary General
 Other (specify)

Election Cycle-to-Date **150.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 02 / 2015

Transaction ID : SA11AI.4750

Amount of Each Receipt this Period
150.00

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

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

1175.00

**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 71
	<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 LIZ BROWN INC.

A. Full Name (Last, First, Middle Initial)
Ray Williams

Mailing Address 9838 N 1100 E

City Kendallville State IN Zip Code 46755

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

Name of Employer Airframe Components Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 28 / 2015

Transaction ID : SA11AI.4901

Amount of Each Receipt this Period
 100.00

B. Full Name (Last, First, Middle Initial)
William W. Wilson MD

Mailing Address 7138 Tanglewood Rd. - 92

City Roanoke State IN Zip Code 46783

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

Name of Employer Parkview Physicians Group Occupation MD

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11AI.4839

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Michael A. Wolfe

Mailing Address 27 W 708 Geenview Ave

City Warrenville State IL Zip Code 60555

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

Name of Employer DuPage County Occupation Circuit Court Judge

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 10 / 2015

Transaction ID : SA11AI.4709

Amount of Each Receipt this Period
 250.00

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

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

1350.00

**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 71
	<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 LIZ BROWN INC.

A. Full Name (Last, First, Middle Initial)
Bruce Wood

Mailing Address 6713 Hursh Rd

City Fort Wayne State IN Zip Code 46845

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

Name of Employer None Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 01 / 2015

Transaction ID : SA11AI.4981

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Bruce Wood

Mailing Address 6713 Hursh Rd

City Fort Wayne State IN Zip Code 46845

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

Name of Employer None Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 24 / 2015

Transaction ID : SA11AI.5018

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
John M. Wright II

Mailing Address 39W215 Woodgate Rd

City St Charles State IL Zip Code 60175

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **100.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2015

Transaction ID : SA11AI.4724

Amount of Each Receipt this Period
100.00

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

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

2100.00

**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 53 OF 71
	<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 LIZ BROWN INC.

A. Full Name (Last, First, Middle Initial)
Nicholas C. Zagotta

Mailing Address 55 W Monroe St
Ste 1700

City Chicago State IL Zip Code 60603

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

Name of Employer Roberts McGivney Zagotta LLC Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **650.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2015

Transaction ID : SA11AI.4719

Amount of Each Receipt this Period
400.00

B. Full Name (Last, First, Middle Initial)
Dennis J. Zent DDS

Mailing Address 3030 N. Bay View Rd.

City Angola State IN Zip Code 46703

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

Name of Employer Self Occupation DDS

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11AI.4833

Amount of Each Receipt this Period
500.00

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 / 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).....

900.00

53075.00

**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 54 OF 71			
	<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 LIZ BROWN INC.

Full Name (Last, First, Middle Initial) A. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2015
Mailing Address 4255 Amon Carter Blvd		Amount of Each Disbursement this Period 696.20
City Fort Worth	State TX	
Zip Code 76155	Purpose of Disbursement Travel	Transaction ID : SB17.4949
Candidate Name	Category/ Type	
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:		

Full Name (Last, First, Middle Initial) B. Blu Spoon Catering		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2015
Mailing Address 6372 West Jefferson		Amount of Each Disbursement this Period 521.50
City Fort Wayne	State IN	
Zip Code 46804	Purpose of Disbursement Catering	Transaction ID : SB17.4384
Candidate Name	Category/ Type	
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:		

Full Name (Last, First, Middle Initial) c. Blu Spoon Catering		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2015
Mailing Address 6372 West Jefferson		Amount of Each Disbursement this Period 508.00
City Fort Wayne	State IN	
Zip Code 46804	Purpose of Disbursement Catering	Transaction ID : SB17.4687
Candidate Name	Category/ Type	
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:		

SUBTOTAL of Disbursements This Page (optional).....	1725.70
TOTAL 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 55 OF 71		
	<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 LIZ BROWN INC.

Full Name (Last, First, Middle Initial) A. LIZ BROWN		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2015
Mailing Address PO BOX 15114		Amount of Each Disbursement this Period 1132.36
City FORT WAYNE	State IN	
Zip Code 46885	Purpose of Disbursement Reimbursement (See Below)	Transaction ID : SB17.4771
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IN	District: 03	

Full Name (Last, First, Middle Initial) B. Union League Club of Chicago		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address 65 W Jackson Blvd		Amount of Each Disbursement this Period 1106.36
City Chicago	State IL	
Zip Code 60604	Purpose of Disbursement Food/Beverage	Transaction ID : SB17.4771.1
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State:	District:	

Full Name (Last, First, Middle Initial) c. Catablu Grille		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2015
Mailing Address 6372 W Jefferson Blvd		Amount of Each Disbursement this Period 718.91
City Fort Wayne	State IN	
Zip Code 46804	Purpose of Disbursement Food/Beverage	Transaction ID : SB17.4973
Candidate Name	Category/Type	
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:	

SUBTOTAL of Disbursements This Page (optional).....	1851.27
TOTAL 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 56 OF 71			
	<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 LIZ BROWN INC.

Full Name (Last, First, Middle Initial) A. Copy Solutions Inc			Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2015
Mailing Address 5928 W Jefferson Blvd			Amount of Each Disbursement this Period 47.07
City Fort Wayne	State IN	Zip Code 46804	
Purpose of Disbursement Printing		Candidate Name	Transaction ID : SB17.4933
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)		Category/ Type	
State:	District:		

Full Name (Last, First, Middle Initial) B. Copy Solutions Inc			Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2015
Mailing Address 5928 W Jefferson Blvd			Amount of Each Disbursement this Period 193.56
City Fort Wayne	State IN	Zip Code 46804	
Purpose of Disbursement Printing		Candidate Name	Transaction ID : SB17.4938
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)		Category/ Type	
State:	District:		

Full Name (Last, First, Middle Initial) c. Copy Solutions Inc			Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2015
Mailing Address 5928 W Jefferson Blvd			Amount of Each Disbursement this Period 106.89
City Fort Wayne	State IN	Zip Code 46804	
Purpose of Disbursement Printing		Candidate Name	Transaction ID : SB17.4946
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)		Category/ Type	
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	347.52
TOTAL 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 57 OF 71			
	<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 LIZ BROWN INC.

Full Name (Last, First, Middle Initial) A. Hotels.com		Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2015
Mailing Address 5400 LBJ Freeway Ste 500		Amount of Each Disbursement this Period 353.80
City Dallas	State TX	
Zip Code 75240		
Purpose of Disbursement Travel	Category/Type	
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:		

Full Name (Last, First, Middle Initial) B. Mark It Red LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2015
Mailing Address PO Box 722		Amount of Each Disbursement this Period 7192.50
City Lebanon	State IN	
Zip Code 46052		
Purpose of Disbursement Strategic Consulting; Printing	Category/Type	
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:		

Full Name (Last, First, Middle Initial) c. Mark It Red LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2015
Mailing Address PO Box 722		Amount of Each Disbursement this Period 4250.00
City Lebanon	State IN	
Zip Code 46052		
Purpose of Disbursement Strategic Consulting	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	11796.30
TOTAL 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 58 OF 71			
	<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 LIZ BROWN INC.

Full Name (Last, First, Middle Initial) A. Mark It Red LLC		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2015
Mailing Address PO Box 722		Amount of Each Disbursement this Period 4669.02
City Lebanon	State IN	
Zip Code 46052	Purpose of Disbursement Strategic Consulting	Transaction ID : SB17.4698
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2015
Mailing Address 6600 N Military Trl		Amount of Each Disbursement this Period 26.74
City Boca Raton	State FL	
Zip Code 33496	Purpose of Disbursement Office Supplies	Transaction ID : SB17.4928
Candidate Name	Category/Type	
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:		

Full Name (Last, First, Middle Initial) c. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2015
Mailing Address 6600 N Military Trl		Amount of Each Disbursement this Period 32.08
City Boca Raton	State FL	
Zip Code 33496	Purpose of Disbursement Office Supplies	Transaction ID : SB17.4932
Candidate Name	Category/Type	
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:		

SUBTOTAL of Disbursements This Page (optional).....	4727.84
TOTAL 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 59 OF 71		
	<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 LIZ BROWN INC.

Full Name (Last, First, Middle Initial) A. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2015
Mailing Address 6600 N Military Trl		Amount of Each Disbursement this Period 372.06
City Boca Raton	State FL	
Zip Code 33496	Purpose of Disbursement Office Supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		

Full Name (Last, First, Middle Initial) B. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2015
Mailing Address 6600 N Military Trl		Amount of Each Disbursement this Period 204.73
City Boca Raton	State FL	
Zip Code 33496	Purpose of Disbursement Office Supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		

Full Name (Last, First, Middle Initial) c. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2015
Mailing Address 6600 N Military Trl		Amount of Each Disbursement this Period 126.88
City Boca Raton	State FL	
Zip Code 33496	Purpose of Disbursement Office Supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	703.67
TOTAL 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 60 OF 71			
	<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 LIZ BROWN INC.

Full Name (Last, First, Middle Initial) A. Pine Valley Country Club			Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2015
Mailing Address 10900 Pine Mills Rd			Amount of Each Disbursement this Period 767.64 Transaction ID : SB17.4955
City Fort Wayne	State IN	Zip Code 46845	
Purpose of Disbursement Catering		Category/ Type	
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:			

Full Name (Last, First, Middle Initial) B. Raise the Money, Inc.			Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2015
Mailing Address PO Box 26466			Amount of Each Disbursement this Period 541.80 Transaction ID : SB17.5039
City Little Rock	State AR	Zip Code 72221	
Purpose of Disbursement CC Processing		Category/ Type	
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:			

Full Name (Last, First, Middle Initial) c. Stephen Regan			Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2015
Mailing Address 705 Three Rivers North			Amount of Each Disbursement this Period 150.00 Transaction ID : SB17.4918
City Fort Wayne	State IN	Zip Code 46802	
Purpose of Disbursement Intern Stipend		Category/ Type	
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:			

SUBTOTAL of Disbursements This Page (optional).....	1459.44
TOTAL 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 61 OF 71			
	<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 LIZ BROWN INC.

Full Name (Last, First, Middle Initial) A. Stephen Regan		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address 705 Three Rivers North		Amount of Each Disbursement this Period 150.00 Transaction ID : SB17.5040
City Fort Wayne	State IN	
Purpose of Disbursement Intern Stipend	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Stephen Regan		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2015
Mailing Address 705 Three Rivers North		Amount of Each Disbursement this Period 150.00 Transaction ID : SB17.4919
City Fort Wayne	State IN	
Purpose of Disbursement Intern Stipend	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Stephen Regan		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2015
Mailing Address 705 Three Rivers North		Amount of Each Disbursement this Period 150.00 Transaction ID : SB17.4912
City Fort Wayne	State IN	
Purpose of Disbursement Intern Stipend	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	450.00
TOTAL 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 62 OF 71			
	<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 LIZ BROWN INC.

Full Name (Last, First, Middle Initial) A. Stephen Regan		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2015
Mailing Address 705 Three Rivers North		Amount of Each Disbursement this Period 300.00 Transaction ID : SB17.4927
City Fort Wayne	State IN	
Zip Code 46802	Purpose of Disbursement Intern Stipend	Category/ Type
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:	

Full Name (Last, First, Middle Initial) B. Graham Renbarger		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address 6931 Schwartz Rd		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.4692
City Fort Wayne	State IN	
Zip Code 46835	Purpose of Disbursement Intern Stipend	Category/ Type
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:	

Full Name (Last, First, Middle Initial) c. Graham Renbarger		Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2015
Mailing Address 6931 Schwartz Rd		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.4917
City Fort Wayne	State IN	
Zip Code 46835	Purpose of Disbursement Intern Stipend	Category/ Type
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:	

SUBTOTAL of Disbursements This Page (optional).....	800.00
TOTAL 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 63 OF 71			
	<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 LIZ BROWN INC.

Full Name (Last, First, Middle Initial) A. Graham Renbarger		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address 6931 Schwartz Rd		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.4923
City Fort Wayne	State IN	
Zip Code 46835	Purpose of Disbursement Intern Stipend	Category/ Type
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:	

Full Name (Last, First, Middle Initial) B. Graham Renbarger		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2015
Mailing Address 6931 Schwartz Rd		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.4920
City Fort Wayne	State IN	
Zip Code 46835	Purpose of Disbursement Intern Stipend	Category/ Type
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:	

Full Name (Last, First, Middle Initial) c. Graham Renbarger		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2015
Mailing Address 6931 Schwartz Rd		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.4913
City Fort Wayne	State IN	
Zip Code 46835	Purpose of Disbursement Intern Stipend	Category/ Type
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:	

SUBTOTAL of Disbursements This Page (optional).....	750.00
TOTAL 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 64 OF 71	
	<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 LIZ BROWN INC.

Full Name (Last, First, Middle Initial) A. Graham Renbarger		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2015
Mailing Address 6931 Schwartz Rd		Amount of Each Disbursement this Period 500.00
City Fort Wayne	State IN	
Zip Code 46835	Purpose of Disbursement Intern Stipend	Transaction ID : SB17.4926
Candidate Name	Category/Type	
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:		

Full Name (Last, First, Middle Initial) B. Rogness Communications LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2015
Mailing Address 1231 Middelfield Rd		Amount of Each Disbursement this Period 4516.00
City Palo Alto	State CA	
Zip Code 94301	Purpose of Disbursement Communications Consulting	Transaction ID : SB17.4910
Candidate Name	Category/Type	
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:		

Full Name (Last, First, Middle Initial) C. Rogness Communications LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2015
Mailing Address 1231 Middelfield Rd		Amount of Each Disbursement this Period -2645.00
City Palo Alto	State CA	
Zip Code 94301	Purpose of Disbursement 7/20 Disbursement Check Voided	Transaction ID : SB17.4915
Candidate Name	Category/Type	
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:		

SUBTOTAL of Disbursements This Page (optional).....	2371.00
TOTAL 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 65 OF 71			
	<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 LIZ BROWN INC.

Full Name (Last, First, Middle Initial) A. Rogness Communications LLC			Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015		
Mailing Address 1231 Middelfield Rd			Amount of Each Disbursement this Period 640.00		
City Palo Alto	State CA	Zip Code 94301	Transaction ID : SB17.4696		
Purpose of Disbursement Communications Consulting		Category/ Type			
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:					

Full Name (Last, First, Middle Initial) B. Rogness Communications LLC			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015		
Mailing Address 1231 Middelfield Rd			Amount of Each Disbursement this Period 996.93		
City Palo Alto	State CA	Zip Code 94301	Transaction ID : SB17.4911		
Purpose of Disbursement Communications Consulting; Expenses		Category/ Type			
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:					

Full Name (Last, First, Middle Initial) C. Maddi Scheele			Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015		
Mailing Address 1803 Monet Dr			Amount of Each Disbursement this Period 250.00		
City Fort Wayne	State IN	Zip Code 46845	Transaction ID : SB17.4690		
Purpose of Disbursement Intern Stipend		Category/ Type			
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:					

SUBTOTAL of Disbursements This Page (optional).....	1886.93
TOTAL 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 66 OF 71			
	<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 LIZ BROWN INC.

Full Name (Last, First, Middle Initial) A. Maddi Scheele			Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2015		
Mailing Address 1803 Monet Dr			Amount of Each Disbursement this Period 250.00		
City Fort Wayne	State IN	Zip Code 46845	Transaction ID : SB17.4916		
Purpose of Disbursement Intern Stipend		Category/ Type			
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:					

Full Name (Last, First, Middle Initial) B. Maddi Scheele			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015		
Mailing Address 1803 Monet Dr			Amount of Each Disbursement this Period 250.00		
City Fort Wayne	State IN	Zip Code 46845	Transaction ID : SB17.4922		
Purpose of Disbursement Intern Stipend		Category/ Type			
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:					

Full Name (Last, First, Middle Initial) C. Maddi Scheele			Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2015		
Mailing Address 1803 Monet Dr			Amount of Each Disbursement this Period 250.00		
City Fort Wayne	State IN	Zip Code 46845	Transaction ID : SB17.4921		
Purpose of Disbursement Intern Stipend		Category/ Type			
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:					

SUBTOTAL of Disbursements This Page (optional).....	750.00
TOTAL 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 67 OF 71			
	<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 LIZ BROWN INC.

Full Name (Last, First, Middle Initial) A. Maddi Scheele		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2015
Mailing Address 1803 Monet Dr		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.4914
City Fort Wayne	State IN	
Zip Code 46845	Purpose of Disbursement Intern Stipend	Category/ Type
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:	

Full Name (Last, First, Middle Initial) B. Maddi Scheele		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2015
Mailing Address 1803 Monet Dr		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.4925
City Fort Wayne	State IN	
Zip Code 46845	Purpose of Disbursement Intern Stipend	Category/ Type
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:	

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2015
Mailing Address 475 L'Enfant Plz		Amount of Each Disbursement this Period 49.00 Transaction ID : SB17.4935
City Washington	State DC	
Zip Code 20536	Purpose of Disbursement Postage	Category/ Type
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:	

SUBTOTAL of Disbursements This Page (optional).....	799.00
TOTAL 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 71			
	<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 LIZ BROWN INC.

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2015
Mailing Address 475 L'Enfant Plz		Amount of Each Disbursement this Period 98.00
City Washington	State DC	
Zip Code 20536	Purpose of Disbursement Postage	Transaction ID : SB17.4941
Candidate Name	Category/ Type	
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:		

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2015
Mailing Address 475 L'Enfant Plz		Amount of Each Disbursement this Period 5.75
City Washington	State DC	
Zip Code 20536	Purpose of Disbursement Postage	Transaction ID : SB17.4972
Candidate Name	Category/ Type	
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:		

Full Name (Last, First, Middle Initial) C.		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	Category/ Type	
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:		

SUBTOTAL of Disbursements This Page (optional).....	103.75
TOTAL This Period (last page this line number only).....	30522.42

**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 71	
	<input type="checkbox"/> 17 <input checked="" 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 LIZ BROWN INC.

Full Name (Last, First, Middle Initial) A. Maria Etling Real Estate Inc.			Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2015	
Mailing Address 100 N Milwaukee Ave			Amount of Each Disbursement this Period 400.00 Transaction ID : SB20A.4778	
City Libertyville	State IL	Zip Code 60048		
Purpose of Disbursement 10/25 - 150; 11/7 - 250		Category/ Type		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2015 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) 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		Category/ Type		
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:			

Full Name (Last, First, Middle Initial) C.			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		Category/ Type		
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:			

SUBTOTAL of Disbursements This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	400.00

**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 71	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF LIZ BROWN INC.

Full Name (Last, First, Middle Initial) A. Bill Brown for City Council		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2015
Mailing Address 512 Hayden St		Amount of Each Disbursement this Period 250.00
City Fort Wayne	State IN	
Zip Code 46802	Purpose of Disbursement 9/28 Contribution Returned by Bank	Transaction ID : SB20C.4978
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2015 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) 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	Category/ Type	
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:		

Full Name (Last, First, Middle Initial) C.		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	Category/ Type	
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:		

SUBTOTAL of Disbursements This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	250.00

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **FRIENDS OF LIZ BROWN INC.** Transaction ID : **SC/10.4111**

LOAN SOURCE Full Name (Last, First, Middle Initial) Election CFO, LLC	Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO Box 26141	

City	State	ZIP Code
Alexandria	VA	22313

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
100.00	0.00	100.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
05 / 27 / 2015	7/1/2015	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	100.00
TOTALS This Period (last page in this line only).....	▶	100.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.