

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
Seybold for Indiana

ADDRESS (number and street) 2301 S. Western Avenue
 Check if different than previously reported. (ACC) Marion IN 46953

2. **FEC IDENTIFICATION NUMBER** ▼ C C00512707 3. IS THIS REPORT NEW (N) **OR** AMENDED (A) CITY ▲ STATE ▲ ZIP CODE ▲ STATE ▼ DISTRICT
IN 05

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 05 / 08 / 2012 in the State of IN

(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on 05 / 08 / 2012 in the State of IN

5. Covering Period 04 / 01 / 2012 through 04 / 18 / 2012

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 Robert L. Swintz

Signature of Treasurer Robert L. Swintz *[Electronically Filed]* Date 04 / 25 / 2012

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Seybold for Indiana

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))....	50525.00	126147.00
(b) Total Contribution Refunds (from Line 20(d))	1650.00	1650.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	48875.00	124497.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	59072.33	103560.71
(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)).....	59072.33	103560.71
8. Cash on Hand at Close of Reporting Period (from Line 27).....	20936.29	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

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

Seybold for Indiana

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	42575.00	99632.00
(ii) Unitemized.....	5950.00	13865.00
(iii) TOTAL of contributions from individuals ▶	48525.00	113497.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	2000.00	12650.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	50525.00	126147.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	50525.00	126147.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	59072.33	103560.71
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	150.00	150.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	1500.00	1500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	1650.00	1650.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	60722.33	105210.71

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	31133.62
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	50525.00
25. SUBTOTAL (add Line 23 and Line 24).....	81658.62
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	60722.33
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	20936.29

**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 30
	<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)
Seybold for Indiana

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

Mailing Address 141 S. Adams Street

City Marion State IN Zip Code 46952

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

Name of Employer n/a Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 11 / 2012

Transaction ID : C-11-003D01

Amount of Each Receipt this Period
 500.00

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

Mailing Address 1010 Golfview Road

City Glenview State IL Zip Code 60025

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

Name of Employer Winterfield, LLC Occupation President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 17 / 2012

Transaction ID : C-14-001E02

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Bethany Burdick

Mailing Address 11929 Forest Drive

City Carmel State IN Zip Code 46033

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

Name of Employer n/a Occupation Homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 18 / 2012

Transaction ID : C-25-003j01

Amount of Each Receipt this Period
 250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 30
	<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)
Seybold for Indiana

A. Full Name (Last, First, Middle Initial)
Jeffrey Carson

Mailing Address P. O. Box 476

City State Zip Code
Sweetser IN 46987

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

Name of Employer Occupation
Peerless Machine & Tool Co. Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 11 / 2012

Transaction ID : C-28-002r01

Amount of Each Receipt this Period
500.00

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

Mailing Address 3214 Blue Heron Walk

City State Zip Code
Marion IN 46952

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

Name of Employer Occupation
Marion Eye Specialists Ophthalmologist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 11 / 2012

Transaction ID : C-32-002z01

Amount of Each Receipt this Period
400.00

C. Full Name (Last, First, Middle Initial)
Kerry Clevenger

Mailing Address 1503 Hawkview Drive

City State Zip Code
Marion IN 46952

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

Name of Employer Occupation
Crest Lanes Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 18 / 2012

Transaction ID : C-33-002Z02

Amount of Each Receipt this Period
500.00

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 7 OF 30
	<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)
Seybold for Indiana

A. Full Name (Last, First, Middle Initial)
Angela Clifton

Mailing Address 5891 E. 100 S.

City Marion State IN Zip Code 46952

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

Name of Employer Information requested Occupation Information requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 11 / 2012

Transaction ID : C-34-002x01

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Janiece Crimmins

Mailing Address 1306 W. Woodland Drive

City Marion State IN Zip Code 46952

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

Name of Employer n/a Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 11 / 2012

Transaction ID : C-42-002y01

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Timothy Dailey

Mailing Address 1632 N. Parkview Drive

City Marion State IN Zip Code 46952

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

Name of Employer Garcor Supply Co. Occupation Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 11 / 2012

Transaction ID : C-45-001302

Amount of Each Receipt this Period
500.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 30
	<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)
Seybold for Indiana

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

Mailing Address 5745 N. Winthrop Avenue

City Indianapolis State IN Zip Code 46220

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

Name of Employer **Barnes & Thornburg** Occupation **Attorney**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 18 / 2012

Transaction ID : C-54-003e01

Amount of Each Receipt this Period
 1000.00

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

Mailing Address P.O. Box 1897

City Marion State IN Zip Code 46952

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

Name of Employer **John L. Earnest, Inc.** Occupation **Healthcare administration**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 11 / 2012

Transaction ID : C-62-001f02

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Mark Fauser

Mailing Address 1411 W. Overlook Road

City Marion State IN Zip Code 46952

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

Name of Employer **Community School of Arts** Occupation **Executive Director**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 11 / 2012

Transaction ID : C-71-003A01

Amount of Each Receipt this Period
 500.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 30
	<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)
Seybold for Indiana

A. Full Name (Last, First, Middle Initial)
Harry Finch

Mailing Address 500 River Drive

City Marion State IN Zip Code 46952

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

Name of Employer Grant County Abstracts Occupation Executive

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 18 / 2012

Transaction ID : C-72-004201

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Rebecca Foreman

Mailing Address 1809 Braewick Drive

City Marion State IN Zip Code 46952

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

Name of Employer Information requested Occupation Information requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 18 / 2012

Transaction ID : C-76-004301

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
James Gartland

Mailing Address 1508 W. Overlook Road

City Marion State IN Zip Code 46952

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

Name of Employer Atlas Foundry Occupation President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 11 / 2012

Transaction ID : C-81-001502

Amount of Each Receipt this Period
 1250.00

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

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

2750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 30
	<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)
Seybold for Indiana

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

Mailing Address 1020 W. Euclid Avenue

City Marion State IN Zip Code 46952

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

Name of Employer Atlas Foundry Occupation Executive

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 11 / 2012

Transaction ID : C-82-002q01

Amount of Each Receipt this Period
 1250.00

B. Full Name (Last, First, Middle Initial)
J. Courtney Gorman

Mailing Address 617 N. River Drive

City Marion State IN Zip Code 46952

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

Name of Employer Self Occupation Dentist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 11 / 2012

Transaction ID : C-87-001t02

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Jeffrey Harris

Mailing Address P. O. Box 689

City Marion State IN Zip Code 46952

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

Name of Employer Matthew's Buick Occupation Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 11 / 2012

Transaction ID : C-101-002v01

Amount of Each Receipt this Period
 500.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 30
	<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)
Seybold for Indiana

A. Full Name (Last, First, Middle Initial)
Richard Harris

Mailing Address P.O. Box 689

City Marion State IN Zip Code 46952

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

Name of Employer **Matthew's Buick** Occupation **Owner**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1100.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 11 / 2012

Transaction ID : C-103-000v02

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Jeffrey Jackson

Mailing Address 1509 Ironwood Drive

City Marion State IN Zip Code 46952

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

Name of Employer **Information requested** Occupation **Information requested**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 18 / 2012

Transaction ID : C-127-004101

Amount of Each Receipt this Period
1000.00

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

Mailing Address 2131 W. Lantern Lane

City Marion State IN Zip Code 46952

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

Name of Employer **Bahr Brothers Manufacturing** Occupation **President**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 11 / 2012

Transaction ID : C-129-000h02

Amount of Each Receipt this Period
250.00

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

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

2250.00

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

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

FOR LINE NUMBER: PAGE 12 OF 30
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Seybold for Indiana

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

Mailing Address 1316 N. Lexington Road

City Marion State IN Zip Code 46952

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

Name of Employer Self Occupation Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 11 / 2012

Transaction ID : C-136-000s02

Amount of Each Receipt this Period
 _____ 200.00

B. Full Name (Last, First, Middle Initial)
Marla Keppler

Mailing Address 1636 N. Parkview Drive

City Marion State IN Zip Code 46952

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

Name of Employer n/a Occupation Homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 17 / 2012

Transaction ID : C-137-003K01

Amount of Each Receipt this Period
 _____ 500.00

C. Full Name (Last, First, Middle Initial)
David Khalouf

Mailing Address 1615 W. Parkview Drive

City Marion State IN Zip Code 46952

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

Name of Employer Kendall Elementary School Occupation Principal

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 11 / 2012

Transaction ID : C-138-002u01

Amount of Each Receipt this Period
 _____ 225.00

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

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

_____ 925.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 30
	<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)
Seybold for Indiana

A. Full Name (Last, First, Middle Initial)
Gregory Kitts

Mailing Address 2501 River Road

City Marion State IN Zip Code 46952

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

Name of Employer ESM, Inc. Occupation CPA

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 11 / 2012

Transaction ID : C-141-001e02

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Douglas Lance

Mailing Address 1114 Overlook Road

City Marion State IN Zip Code 46952

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

Name of Employer YMCA of Grant County Occupation Executive Director

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 11 / 2012

Transaction ID : C-145-001Q02

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Whitney Lee

Mailing Address 7041 S. 500 E.

City Montgomery State IN Zip Code 47558

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

Name of Employer Information requested Occupation Information requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 18 / 2012

Transaction ID : C-146-004801

Amount of Each Receipt this Period
2500.00

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

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

3200.00

**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 30
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Seybold for Indiana

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

Mailing Address 911 W. Overlook Road

City Marion State IN Zip Code 46952

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

Name of Employer Winterfield, LLC Occupation President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 17 / 2012

Transaction ID : C-148-001P02

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Jeffrey Lewis

Mailing Address 5851 Upton Street

City Mc Lean State VA Zip Code 22101

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

Name of Employer EHIM Occupation Chief Operating Officer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 08 / 2012

Transaction ID : C-149-002n01

Amount of Each Receipt this Period
1000.00

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

Mailing Address 10766 Torrey Pines Circle

City Carmel State IN Zip Code 46032

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

Name of Employer Barnes & Thornburg Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 18 / 2012

Transaction ID : C-152-003I01

Amount of Each Receipt this Period
250.00

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

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

1500.00

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

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

FOR LINE NUMBER: (check only one)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 15 OF 30

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NAME OF COMMITTEE (In Full)
Seybold for Indiana

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

Mailing Address 534 Chestnut Forest

City Ft Wayne State IN Zip Code 46814

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

Name of Employer Star Financial Bank Occupation President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 11 / 2012

Transaction ID : C-154-003E01

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 10618 Indian Ridge Drive

City Ft Wayne State IN Zip Code 46814

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

Name of Employer Star Financial Bank Occupation Banker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 11 / 2012

Transaction ID : C-155-003F01

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Chuck Martindale

Mailing Address 1215 E. Benson Court

City Bloomington State IN Zip Code 47401

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

Name of Employer Hoosier Energy Rural Electric Coopera Occupation Economic Developer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 18 / 2012

Transaction ID : C-157-003v01

Amount of Each Receipt this Period
 500.00

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

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

2500.00

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

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

FOR LINE NUMBER: PAGE 16 OF 30
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Seybold for Indiana

A. Full Name (Last, First, Middle Initial)
Jack Middleton

Mailing Address 8911 Hunters Creek

City Indianapolis State IN Zip Code 46227

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

Name of Employer U.S. House of Representatives Occupation Mobile Office Director

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 18 / 2012

Transaction ID : C-164-004601

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Phyllis Moorehead

Mailing Address 1502 Hawksview Drive

City Marion State IN Zip Code 46952

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

Name of Employer Moorehead Communications Occupation Executive

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 11 / 2012

Transaction ID : C-169-003001

Amount of Each Receipt this Period
 2500.00

C. Full Name (Last, First, Middle Initial)
Scott Moorehead

Mailing Address 2302 Lantern Lane

City Marion State IN Zip Code 46952

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

Name of Employer Moorehead Communications Occupation Executive

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 11 / 2012

Transaction ID : C-170-003701

Amount of Each Receipt this Period
 2500.00

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 30
	<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)
Seybold for Indiana

A. Full Name (Last, First, Middle Initial)
Jonathan Perez

Mailing Address 603 N. Hendricks Avenue

City Marion State IN Zip Code 46952

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

Name of Employer City of Marion Occupation Deputy Mayor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2425.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 18 / 2012

Transaction ID : C-184-000803

Amount of Each Receipt this Period
2200.00

B. Full Name (Last, First, Middle Initial)
Kristen Perez

Mailing Address 603 N. Hendricks Avenue

City Marion State IN Zip Code 46952

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

Name of Employer Apex Physical Therapy Occupation Physical Therapist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 18 / 2012

Transaction ID : C-186-003w01

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
Bambra Pitman

Mailing Address 1255 Coral Springs Drive

City Cicero State IN Zip Code 46034

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

Name of Employer Barnes & Thornburg Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 18 / 2012

Transaction ID : C-188-003d01

Amount of Each Receipt this Period
250.00

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

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

4950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 30
	<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)
Seybold for Indiana

A. Full Name (Last, First, Middle Initial)
Salil Rajmaira

Mailing Address 3028 N. Lagro Road

City Marion State IN Zip Code 46952

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

Name of Employer Information requested Occupation Information requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 11 / 2012

Transaction ID : C-194-002s01

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Susan Reese

Mailing Address 901 N. Wabash Avenue

City Marion State IN Zip Code 46952

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

Name of Employer Information requested Occupation Information requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 11 / 2012

Transaction ID : C-197-003C01

Amount of Each Receipt this Period
 400.00

C. Full Name (Last, First, Middle Initial)
Anthony Samuel

Mailing Address 9441 Whisper Bend Drive

City Indianapolis State IN Zip Code 46278

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

Name of Employer Information requested Occupation Information requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 17 / 2012

Transaction ID : C-206-003N01

Amount of Each Receipt this Period
 250.00

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

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

1650.00

**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 30
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Seybold for Indiana

A. Full Name (Last, First, Middle Initial)
Linda Sanders

Mailing Address 425 Lockerbie Road

City State Zip Code
Shelbyville IN 46176

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

Name of Employer Occupation
Wessler Engineering Business Development

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 18 2012

Transaction ID : C-207-003s01

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Richard Starkey

Mailing Address 5269 Roland Drive

City State Zip Code
Indianapolis IN 46228

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

Name of Employer Occupation
Barnes & Thornburg Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 18 2012

Transaction ID : C-218-003m01

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Melanie Street

Mailing Address 97 Cedar Lane

City State Zip Code
Cicero IN 46034

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

Name of Employer Occupation
Information requested Information requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 18 2012

Transaction ID : C-220-003y01

Amount of Each Receipt this Period
500.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 30
	<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)
Seybold for Indiana

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

Mailing Address **P. O. Box 440**

City **Cicero** State **IN** Zip Code **46034**

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

Name of Employer **State of Indiana** Occupation **State Representative**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 17 / 2012

Transaction ID : C-230-003a01

Amount of Each Receipt this Period
1000.00

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

Mailing Address **637 Laura Lane**
P.O. Box 97

City **Sweetser** State **IN** Zip Code **46987**

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

Name of Employer **Marion General Hospital** Occupation **CEO**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 17 / 2012

Transaction ID : C-234-001R02

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Charlie Wallace

Mailing Address **1003 Overlook Road**

City **Marion** State **IN** Zip Code **46952**

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

Name of Employer **Ross Supply Company** Occupation **President**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 11 / 2012

Transaction ID : C-240-001Z02

Amount of Each Receipt this Period
1000.00

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

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

2500.00

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

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

FOR LINE NUMBER: PAGE 21 OF 30
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Seybold for Indiana

A. Full Name (Last, First, Middle Initial)
Cammie Wike

Mailing Address 2142 N. Bethlehem Road

City Marion State IN Zip Code 46952

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

Name of Employer GPS America Occupation Controller

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 11 / 2012

Transaction ID : C-249-002w01

Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
Joseph Wiley

Mailing Address 3284 N. Candlelight Trail

City Marion State IN Zip Code 46952

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

Name of Employer Information requested Occupation Information requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 11 / 2012

Transaction ID : C-252-000k02

Amount of Each Receipt this Period
 200.00

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).....

2700.00

42575.00

**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 30
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Seybold for Indiana

A. Full Name (Last, First, Middle Initial)
Hoosier Pac

Mailing Address 8134 E. 50th Street

City Lawrence State IN Zip Code 46226

FEC ID number of contributing federal political committee. **C** C00338848

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 17 / 2012

Transaction ID : C-115-000D02

Amount of Each Receipt this Period
 2000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary 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

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).....

2000.00

2000.00

**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 23 OF 30	
	<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)
Seybold for Indiana

Full Name (Last, First, Middle Initial) A. Campaign Grid		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2012
Mailing Address 414 Commerce Drive Suite 100		Amount of Each Disbursement this Period 10000.00 Transaction ID : D1-003o01
City Fort Washington	State PA Zip Code 19034	
Purpose of Disbursement Campaign advertisements	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Chronicle Tribune		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2012
Mailing Address 610 S. Adams Street		Amount of Each Disbursement this Period 2035.00 Transaction ID : D2-004501
City Marion	State IN Zip Code 46952	
Purpose of Disbursement Advertisements	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Grant County Republican Party		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2012
Mailing Address 203 S. Washington Street		Amount of Each Disbursement this Period 500.00 Transaction ID : D4-000201
City Marion	State IN Zip Code 46952	
Purpose of Disbursement Event tickets	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	12535.00
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 24 OF 30	
	<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)
Seybold for Indiana

Full Name (Last, First, Middle Initial) A. Gridiron Communications		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2012
Mailing Address 12650 Adams Road		Amount of Each Disbursement this Period 8247.16
City Granger	State IN	
Zip Code 46530	Purpose of Disbursement Mass mailing	Transaction ID : D6-003p01
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Mr. Zac Lloyd		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2012
Mailing Address 201 N. D. Street		Amount of Each Disbursement this Period 1000.00
City Marion	State IN	
Zip Code 46952	Purpose of Disbursement Salary	Transaction ID : D10-002E02
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Mr. Zac Lloyd		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2012
Mailing Address 201 N. D. Street		Amount of Each Disbursement this Period 466.22
City Marion	State IN	
Zip Code 46952	Purpose of Disbursement Meetings/travel	Transaction ID : D11-002E03
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	9713.38
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 25 OF 30			
	<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)
Seybold for Indiana

Full Name (Last, First, Middle Initial) A. Mr. Jack Middleton		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2012
Mailing Address 8911 Hunter's Creek Drive Apt 208		Amount of Each Disbursement this Period 1000.00 Transaction ID : D23-002609
City Indianapolis State IN Zip Code 46227	Category/Type	
Purpose of Disbursement Salary	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Mr. Jack Middleton		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2012
Mailing Address 8911 Hunter's Creek Drive Apt 208		Amount of Each Disbursement this Period 1000.00 Transaction ID : D24-00260A
City Indianapolis State IN Zip Code 46227	Category/Type	
Purpose of Disbursement Salary	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Mr. Jack Middleton		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2012
Mailing Address 8911 Hunter's Creek Drive Apt 208		Amount of Each Disbursement this Period 1000.00 Transaction ID : D25-00260B
City Indianapolis State IN Zip Code 46227	Category/Type	
Purpose of Disbursement Salary	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3000.00
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 26 OF 30	
	<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)
Seybold for Indiana

Full Name (Last, First, Middle Initial) A. Peerless Printing		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2012
Mailing Address 513 S. Washington Street		Amount of Each Disbursement this Period 1312.87
City Marion	State IN Zip Code 46953	
Purpose of Disbursement Printing	Candidate Name	Transaction ID : D27-003q01
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Piryx		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2012
Mailing Address 144 2nd St., 1st Floor		Amount of Each Disbursement this Period 58.50
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Credit card processing fe	Candidate Name	Transaction ID : D30-002H03
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Piryx		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2012
Mailing Address 144 2nd St., 1st Floor		Amount of Each Disbursement this Period 21.38
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Credit card processing fe	Candidate Name	Transaction ID : D31-002H04
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	1392.75
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 27 OF 30			
	<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)
Seybold for Indiana

Full Name (Last, First, Middle Initial) A. Mr. Wayne Seybold			Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2012	
Mailing Address 2301 S. Western Avenue			Amount of Each Disbursement this Period 425.20	
City Marion	State IN	Zip Code 46953	Transaction ID : D34-002C02	
Purpose of Disbursement Airfare		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:			

Full Name (Last, First, Middle Initial) B. The Englehart Group			Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2012	
Mailing Address 405 Massachusetts Ave., #300			Amount of Each Disbursement this Period 9910.00	
City Indianapolis	State IN	Zip Code 46204	Transaction ID : D43-002804	
Purpose of Disbursement Campaign consultants		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:			

Full Name (Last, First, Middle Initial) c. The Englehart Group			Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2012	
Mailing Address 405 Massachusetts Ave., #300			Amount of Each Disbursement this Period 7543.00	
City Indianapolis	State IN	Zip Code 46204	Transaction ID : D44-002805	
Purpose of Disbursement Campaign consultants		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	17878.20
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 28 OF 30	
	<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)
Seybold for Indiana

Full Name (Last, First, Middle Initial) A. The Englehart Group		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2012
Mailing Address 405 Massachusetts Ave., #300		Amount of Each Disbursement this Period 7543.00
City Indianapolis State IN Zip Code 46204	Category/Type	
Purpose of Disbursement Campaign consultants		Transaction ID : D45-002806
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. The Englehart Group		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2012
Mailing Address 405 Massachusetts Ave., #300		Amount of Each Disbursement this Period 7000.00
City Indianapolis State IN Zip Code 46204	Category/Type	
Purpose of Disbursement Campaign consultants		Transaction ID : D46-002807
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" 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	Category/Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	14543.00
TOTAL This Period (last page this line number only).....	59062.33

**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 29 OF 30	
	<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)
Seybold for Indiana

Full Name (Last, First, Middle Initial) A. Gymnastics Mid America		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2012
Mailing Address 845 E. Bradford		Amount of Each Disbursement this Period 100.00
City Marion	State IN Zip Code 46952	
Purpose of Disbursement Refund	Candidate Name	Transaction ID : D14-003Z01
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Apartments The McShurley		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2012
Mailing Address 1901 N. Forest Avenue		Amount of Each Disbursement this Period 50.00
City Muncie	State IN Zip Code 47304	
Purpose of Disbursement Refund	Candidate Name	Transaction ID : D47-003W01
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

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	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	150.00

**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 30 OF 30	
	<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)
Seybold for Indiana

Full Name (Last, First, Middle Initial) A. Grant County Republican Party		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2012
Mailing Address 203 S. Washington Street		Amount of Each Disbursement this Period 1500.00
City Marion State IN Zip Code 46952	Category/ Type	
Purpose of Disbursement Refund		Transaction ID : D5-000202
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <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).....	1500.00
TOTAL This Period (last page this line number only).....	1500.00