

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 154
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**NiSource Inc. PAC**

Full Name (Last, First, Middle Initial) <b>A. Kathleen O'Leary</b>			Date of Receipt MM / DD / YYYY 04 / 30 / 2015
Mailing Address 225 A Street NE			<b>Transaction ID : PR263098713734</b>
City Washington	State DC	Zip Code 20002-7340	Amount of Each Receipt this Period 416.66
FEC ID number of contributing federal political committee. C		P/R Deduction (\$416.66 Monthly)	
Name of Employer Northern Ind Public Service Co	Occupation President	Aggregate Year-to-Date 1666.64	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Patricia M Terpin</b>			Date of Receipt MM / DD / YYYY 04 / 30 / 2015
Mailing Address 50 West Bruceeton Rd			<b>Transaction ID : PR263099613734</b>
City Pittsburgh	State PA	Zip Code 15236-4283	Amount of Each Receipt this Period 90.04
FEC ID number of contributing federal political committee. C		P/R Deduction (\$90.04 Monthly)	
Name of Employer Columbia Gas of Pennsylvania	Occupation Mgr Customer Programs	Aggregate Year-to-Date 360.16	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Richard A Hollinger</b>			Date of Receipt MM / DD / YYYY 04 / 30 / 2015
Mailing Address 3104 Markle Road			<b>Transaction ID : PR263100113734</b>
City York	State PA	Zip Code 17408	Amount of Each Receipt this Period 72.97
FEC ID number of contributing federal political committee. C		P/R Deduction (\$72.97 Monthly)	
Name of Employer NiSource Corporate Services Co	Occupation Major Account Representative	Aggregate Year-to-Date 291.88	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	579.67
<b>TOTAL</b> This Period (last page this line number only).....▶	