

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 OF 42
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**Ice Miller PAC**

**A. Funke, Sarah, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282-0200

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

Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.04

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2017

**Transaction ID : SA11AI.7680**

Amount of Each Receipt this Period  
500.04

Memo Item  
 \$83.34 monthly: 1/9, 2/7, 3/7, 4/7, 5/5, 6/7/17

**B. Genetos, Philip, C., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282-0200

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

Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
499.98

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2017

**Transaction ID : SA11AI.7683**

Amount of Each Receipt this Period  
499.98

Memo Item  
 \$83.33 monthly: 1/9, 2/7, 3/7, 4/7, 5/5, 6/7/17

**C. Gilligan, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 250 West Street

City Columbus State OH Zip Code 43215

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

Name of Employer (for Individual) Ice Miller LLLP Occupation (for Individual) Attorney

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.02

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2017

**Transaction ID : SA11AI.7684**

Amount of Each Receipt this Period  
250.02

Memo Item  
 \$41.67 monthly: 1/9, 2/7, 3/7, 4/7, 5/5, 6/7/17

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1250.04

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