

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Hoosiers Supporting Buyer For Congress

ADDRESS (number and street) 200 North Main St., P.O. Box 712
 Check if different than previously reported. (ACC)
Monticello, IN 47960

2. **FEC IDENTIFICATION NUMBER** C00255471
CITY STATE ZIP CODE STATE DISTRICT
IN 04
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 04 17 2008 through 06 30 2008

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 Douglas E. Raderstorf

Signature of Treasurer Electronically Filed by Douglas E. Raderstorf Date 07 15 2008

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

Hoosiers Supporting Buyer For Congress

Report Covering the Period:

From:

M	M
0	4

D	D
1	7

Y	Y	Y	Y
2	0	0	8

To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	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)).....	182269.08	479692.21
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	182269.08	479692.21
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	46463.01	275611.17
(b) Total Offsets to Operating Expenditures (from Line 14).....	36.00	238.94
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	46427.01	275372.23
8. Cash on Hand at Close of Reporting Period (from Line 27).....	628854.91	
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).....	5838.39	

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

Write or Type Committee Name
Hoosiers Supporting Buyer For Congress

Report Covering the Period: From:

M	M
0	4

D	D
1	7

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

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	58400.00	98295.00
(i) Itemized (use Schedule A).....	4235.36	21203.07
(ii) Unitemized.....	62635.36	119498.07
(iii) TOTAL of contributions from individuals..... ▶	1675.00	3635.42
(b) Political Party Committees.....	117958.72	356558.72
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	182269.08	479692.21
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))		
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.).....	36.00	238.94
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	639.10	9648.89
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	182944.18	489580.04

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	46463.01	275611.17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS.....	0.00	12300.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	46463.01	287911.17

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	492373.74
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	182944.18
25. SUBTOTAL (add Line 23 and Line 24).....	675317.92
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	46463.01
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	628854.91

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

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

FOR LINE NUMBER: PAGE 5 / 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Abbott Laboratories PAC

Mailing Address 1710 Rhode Island Ave., NW
Suite 300

City State Zip Code
Washington DC 20036

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	3	/	2	0	0	8

Transaction ID: 80423.C16769

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Abbott Laboratories PAC

Mailing Address 1710 Rhode Island Ave., NW
Suite 300

City State Zip Code
Washington DC 20036

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	7	/	2	0	0	8

Transaction ID: 80626.C16860

Amount of Each Receipt this Period
500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Action Committee for Rural

Mailing Address Electrification PAC
4301 Wilson Blvd.

City State Zip Code
Arlington VA 22203

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	4	/	2	0	0	8

Transaction ID: 80424.C16770

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **2500.00**

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 6 / 105
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
AFLAC Federal Relations

Mailing Address 1300 Pennsylvania Avenue, NW
Suite 300

City Washington State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt 05 / 07 / 2008
Transaction ID: 80626.C16874
Amount of Each Receipt this Period 2500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
American Academy of

Mailing Address Physicians Assistant
950 North Washington St.

City Alexandria State VA Zip Code 22314

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 05 / 07 / 2008
Transaction ID: 80626.C16858
Amount of Each Receipt this Period 1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
American Apparel & Footwear Assoc.

Mailing Address 1601 N. Kent St. Suite 1200

City Rosslyn State VA Zip Code 22209

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 06 / 30 / 2008
Transaction ID: 80708.C16978
Amount of Each Receipt this Period 1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 4500.00

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

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

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

FOR LINE NUMBER: PAGE 7 / 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
American Association of
Mailing Address Nurse Anesthetist PAC
25 Massachusetts Ave. NW
City Washington State DC Zip Code 20001
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 3500.00
Date of Receipt 05 / 15 / 2008
Transaction ID: 80626.C16893
Amount of Each Receipt this Period 1000.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
American Chiropractic
Mailing Address Association PAC
1701 Clarendon Blvd.
City Rosslyn State VA Zip Code 22209
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00
Date of Receipt 04 / 29 / 2008
Transaction ID: 80429.C16788
Amount of Each Receipt this Period 1000.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
American College of Cardiology
Mailing Address 2400 North Street NW
City Washington State DC Zip Code 20037
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00
Date of Receipt 05 / 07 / 2008
Transaction ID: 80626.C16864
Amount of Each Receipt this Period 1500.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 3500.00
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 8 / 105
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
American College of Surgeons

Mailing Address 1640 Wisconsin Ave. NW

City Washington State DC Zip Code 20007

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 6000.00

Date of Receipt 05 / 07 / 2008
Transaction ID: 80626.C16863

Amount of Each Receipt this Period 1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
American Electric Power

Mailing Address Committee for Responsible Govn
801 Pennsylvania Ave. NW Suite 320

City Washington State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 05 / 02 / 2008
Transaction ID: 80502.C16789

Amount of Each Receipt this Period 1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
American Gas Assoc. PAC

Mailing Address 400 N. Capital Street NW

City Washington State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 05 / 15 / 2008
Transaction ID: 80626.C16892

Amount of Each Receipt this Period 1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3000.00**

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 9 / 105			
(check only one)				
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) American Health Care		Date of Receipt	
	Mailing Address Association PAC 1201 L Street NW		M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: 80626.C16875
	Washington	DC	20005	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		4000.00	
Name of Employer		Occupation		Receipt
Receipt For: 2008		Election Cycle-to-Date ▼		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		5000.00		
<input type="checkbox"/> Other (specify) ▼				

B.	Full Name (Last, First, Middle Initial) American Hospital Assoc. PAC		Date of Receipt	
	Mailing Address 325 Seventh Street, NW		M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: 80626.C16857
	Washington	DC	20004	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		1000.00	
Name of Employer		Occupation		Receipt
Receipt For: 2008		Election Cycle-to-Date ▼		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		2000.00		
<input type="checkbox"/> Other (specify) ▼				

C.	Full Name (Last, First, Middle Initial) American Maritime Officers		Date of Receipt	
	Mailing Address Voluntary Political Action Fund 490 Lenfant Plaza East SW		M M / D D / Y Y Y Y 0 4 / 2 9 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: 80429.C16786
	Washington	DC	20024	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		1000.00	
Name of Employer		Occupation		Receipt
Receipt For: 2008		Election Cycle-to-Date ▼		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		3500.00		
<input type="checkbox"/> Other (specify) ▼				

SUBTOTAL of Receipts This Page (optional)	▶	6000.00
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 10 / 105
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
American Medical Assoc. PAC

Mailing Address 1101 Vermont Ave., NW

City State Zip Code
Washington DC 20005

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
05 / 07 / 2008

Transaction ID: 80626.C16856

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address Therapy Assoc. PAC
4720 Montgomery Lane

City State Zip Code
Bethesda MD 20824

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
MM / DD / YYYY
05 / 15 / 2008

Transaction ID: 80626.C16894

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
American Veterinary Medical Assoc.

Mailing Address 1910 Sunderland Place NW

City State Zip Code
Washington DC 20036

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
MM / DD / YYYY
05 / 02 / 2008

Transaction ID: 80502.C16792

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3000.00**

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 11 / 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
AmerisourceBergen PAC

Mailing Address 1300 Morris Drive
Suite 100

City State Zip Code
Chesterbrook PA 19087

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 7 / 2 0 0 8

Transaction ID: 80626.C16866

Amount of Each Receipt this Period
5000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
AT&T PAC

Mailing Address 1401 I Street
Suite 1100

City State Zip Code
Washington DC 20005

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 1 5 / 2 0 0 8

Transaction ID: 80626.C16890

Amount of Each Receipt this Period
5000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Baxter Healthcare PAC

Mailing Address 800 Connecticut Ave., NW
Suite 1100

City State Zip Code
Washington DC 20006

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 7 / 2 0 0 8

Transaction ID: 80626.C16859

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **11000.00**

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 12 / 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Boston Scientific Corp. PAC

Mailing Address 1331 Pennsylvania Ave. NW
Suite 550 South

City Washington State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 06 / 06 / 2008
Transaction ID: 80626.C16902
 Amount of Each Receipt this Period: 1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Bristol-Myers Squibb Co. Employee Pac

Mailing Address 345 Park Ave., 11th Fl.

City New York State NY Zip Code 10154

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt: 05 / 22 / 2008
Transaction ID: 80626.C16836
 Amount of Each Receipt this Period: 1500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Comcast Corp. PAC

Mailing Address 2001 Pennsylvania Ave. NW
Suite 500

City Washington State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3500.00

Date of Receipt: 06 / 04 / 2008
Transaction ID: 80626.C16906
 Amount of Each Receipt this Period: 1500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 4000.00

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 / 105
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
CTIA PAC

Mailing Address 1400 16th Street NW
Suite 600

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 05 / 02 / 2008
Transaction ID: 80502.C16793
Amount of Each Receipt this Period: 1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Cummins Inc. PAC

Mailing Address 601 Pennsylvania Ave. NW
North Bldg Suite 625

City Washington State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt: 05 / 15 / 2008
Transaction ID: 80626.C16888
Amount of Each Receipt this Period: 1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Dealers Election Action Committee

Mailing Address of the NADA
8400 Westpark Dr.

City Mc Lean State VA Zip Code 22102

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt: 05 / 07 / 2008
Transaction ID: 80626.C16869
Amount of Each Receipt this Period: 2500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 4500.00

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 14 / 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Dealers Election Action Committee

Mailing Address of the NADA
8400 Westpark Dr.

City State Zip Code
Mc Lean VA 22102

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 7 / 2 0 0 8

Transaction ID: 80626.C16870

Amount of Each Receipt this Period
2500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Dow Chemical Co. AGPAC

Mailing Address
9330 Zionsville Rd.

City State Zip Code
Indianapolis IN 46268

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 2 9 / 2 0 0 8

Transaction ID: 80429.C16780

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Dow Chemical Co. AGPAC

Mailing Address
9330 Zionsville Rd.

City State Zip Code
Indianapolis IN 46268

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 0 6 / 2 0 0 8

Transaction ID: 80626.C16898

Amount of Each Receipt this Period
2000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **5500.00**

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 15 / 105
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
DTE Energy Company P AC

Mailing Address 2000 Second Ave.

City State Zip Code
Detroit MI 48226

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 0 8

Transaction ID: 80421.C16766

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Duke Energy Corporation PAC

Mailing Address 401 Ninth Street NW
Suite 1100

City State Zip Code
Washington DC 20004

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 0 8

Transaction ID: 80429.C16787

Amount of Each Receipt this Period
2000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 6405 Tree Top Circle

City State Zip Code
Columbia MD 21045

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 0 8

Transaction ID: 80626.C16842

Amount of Each Receipt this Period
500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3500.00**

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 16 / 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
EMBARQ PAC

Mailing Address 150 Fayetteville Street Mall #2810

City Raleigh State NC Zip Code 27601

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 04 / 25 / 2008
Transaction ID: 80425.C16772
 Amount of Each Receipt this Period: 1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
General Electric PAC

Mailing Address 1299 Pennsylvania Ave., NW Suite 1100W

City Washington State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 04 / 25 / 2008
Transaction ID: 80425.C16779
 Amount of Each Receipt this Period: 1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Halliburton PAC

Mailing Address 1150 18th St. NW Suite 200

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 04 / 23 / 2008
Transaction ID: 80423.C16768
 Amount of Each Receipt this Period: 1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 3000.00

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 / 105

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 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)
Hoosiers Supporting Buyer For Congress

A.

Full Name (Last, First, Middle Initial)
Hardwood Federation

Mailing Address 1111 19th Street NW
Suite 800

City State Zip Code
Washington DC 20036

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

Name of Employer Occupation

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 8

Transaction ID: 80708.C16982

Amount of Each Receipt this Period

2000.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Health Net Federal Services PAC

Mailing Address 2107 Wilson Blvd.

City State Zip Code
Arlington VA 22201

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

Name of Employer Occupation

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 0 8

Transaction ID: 80626.C16868

Amount of Each Receipt this Period

1000.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
ITT Industries

Mailing Address 1650 Tysons Blvd.
Suite 1700

City State Zip Code
Mc Lean VA 22102

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

Name of Employer Occupation

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 0 8

Transaction ID: 80425.C16778

Amount of Each Receipt this Period

1000.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

4000.00

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 18 / 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Jewelers of America

Mailing Address 52 Vanerbilt Ave.
19th Floor

City State Zip Code
New York NY 10017

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 2 / 2 0 0 8

Transaction ID: 80502.C16794

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Johnson & Johnson Employees Good

Mailing Address Government Fund
One Johnson & Johnson Plaza.

City State Zip Code
New Brunswick NJ 08933-7204

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 0 4 / 2 0 0 8

Transaction ID: 80626.C16905

Amount of Each Receipt this Period
1500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
KOCH Industries PAC

Mailing Address 655 15th Street, NW
Suite 445

City State Zip Code
Washington DC 20005

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4500.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 2 9 / 2 0 0 8

Transaction ID: 80429.C16785

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3500.00**

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 19 / 105
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Lorillard Tobacco Company

Mailing Address 714 Green Valley Rd.

City Greensboro State NC Zip Code 27408

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 0 8

Transaction ID: 80425.C16773

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Marathon Oil Employees PAC

Mailing Address 539 South Main Street
Room 2635

City Findlay State OH Zip Code 45840

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 1 5 / 2 0 0 8

Transaction ID: 80626.C16891

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
McKesson Corp. Employees

Mailing Address Political Fund
One Post Street, 34th Floor

City San Francisco State CA Zip Code 94104

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 0 8

Transaction ID: 80425.C16777

Amount of Each Receipt this Period
2000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 4000.00

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 20 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.

Full Name (Last, First, Middle Initial)
McKesson Corp. Employees

Mailing Address Political Fund
One Post Street, 34th Floor

City State Zip Code
San Francisco CA 94104

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 0 8

Transaction ID: 80626.C16865

Amount of Each Receipt this Period

3000.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Merck PAC

Mailing Address 601 Pennsylvania Ave. NW
North Building Suite 1200

City State Zip Code
Washington DC 20004

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4500.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 0 8

Transaction ID: 80626.C16881

Amount of Each Receipt this Period

1500.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
National Air Traffic Controllers

Mailing Address 1325 Massachusetts Ave. NW

City State Zip Code
Washington DC 20005

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 2 / 2 0 0 8

Transaction ID: 80626.C16839

Amount of Each Receipt this Period

1000.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

5500.00

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 21 / 105

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 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)
Hoosiers Supporting Buyer For Congress

A.

Full Name (Last, First, Middle Initial)
National Aocs. of Psychiatric

Mailing Address Health Systems
701 13th Street, NW

City State Zip Code
Washington DC 20005

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 0 8

Transaction ID: 80429.C16784

Amount of Each Receipt this Period

1000.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
National Assoc. of Convenience Stores

Mailing Address 1600 Duke Street

City State Zip Code
Alexandria VA 22314

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
7500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 4 / 2 0 0 8

Transaction ID: 80626.C16903

Amount of Each Receipt this Period

5000.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
National Assoc. of Health Underwriters

Mailing Address 2000 North 14th Street
Suite 450

City State Zip Code
Arlington VA 22201

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 0 8

Transaction ID: 80425.C16776

Amount of Each Receipt this Period

1000.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

7000.00

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 22 / 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
National Fuel Gas
Mailing Address 6363 Main Street
City State Zip Code
Williamsville NY 14221
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1000.00
Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 0 8
Transaction ID: 80423.C16767
Amount of Each Receipt this Period
1000.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
National Funeral Directors Assoc. PAC
Mailing Address 13625 Bishops Drive
City State Zip Code
Brookfield WI 53005-6607
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
4500.00
Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 0 8
Transaction ID: 80425.C16775
Amount of Each Receipt this Period
1000.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
National Roofing Contractors
Mailing Address Association PAC
324 Fourth Street, NE
City State Zip Code
Washington DC 20002
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
2500.00
Date of Receipt
M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8
Transaction ID: 80708.C16916
Amount of Each Receipt this Period
2500.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **4500.00**
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 23 / 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
National Roofing Contractors

Mailing Address Association PAC
324 Fourth Street, NE

City Washington State DC Zip Code 20002

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 3 0 / 2 0 0 8

Transaction ID: 80708.C16980

Amount of Each Receipt this Period
2500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address
4121 Wilson Blvd., 10th Floor

City Arlington State VA Zip Code 22203

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 2 9 / 2 0 0 8

Transaction ID: 80429.C16782

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
NAUS-PAC

Mailing Address 5535 Hempstead Way

City Springfield State VA Zip Code 22151

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 2 5 / 2 0 0 8

Transaction ID: 80425.C16774

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **4500.00**

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 24 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.

Full Name (Last, First, Middle Initial)
Novartis Corporation PAC

Mailing Address 701 Pennsylvania Ave., NW
Suite 725

City State Zip Code
Washington DC 20004

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 3500.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 0 8

Transaction ID: 80626.C16862

Amount of Each Receipt this Period

1500.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
NRA-Political Victory Fund

Mailing Address 11250 Waples Mill Road

City State Zip Code
Fairfax VA 22030

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 4 / 2 0 0 8

Transaction ID: 80626.C16907

Amount of Each Receipt this Period

1000.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
PenneyPAC

Mailing Address 6501 Legacy Drive

City State Zip Code
Plano TX 75024

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 4 / 2 0 0 8

Transaction ID: 80626.C16909

Amount of Each Receipt this Period

1000.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

3500.00

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 25 / 105
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
PFIZER PAC

Mailing Address 235 East 42nd St.

City State Zip Code
New York NY 10017

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3500.00

Date of Receipt
MM / DD / YYYY
05 / 02 / 2008

Transaction ID: 80502.C16791

Amount of Each Receipt this Period
1500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 235 East 42nd St.

City State Zip Code
New York NY 10017

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4500.00

Date of Receipt
MM / DD / YYYY
06 / 04 / 2008

Transaction ID: 80626.C16908

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Pharmaceutical Research & Manufacturers

Mailing Address of America Better Gov. Com.
1100- 15th St., NW

City State Zip Code
Washington DC 20005

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt
MM / DD / YYYY
05 / 22 / 2008

Transaction ID: 80626.C16834

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3500.00**

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 26 / 105
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Progress Energy PAC

Mailing Address P.O. Box 1510

City Raleigh State NC Zip Code 27602

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 05 / 22 / 2008
Transaction ID: 80626.C16837
Amount of Each Receipt this Period: 1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
RJ Reynolds PAC

Mailing Address 401 N. Main St.
P.O. Box 718

City Winston Salem State NC Zip Code 27102

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt: 05 / 07 / 2008
Transaction ID: 80626.C16871
Amount of Each Receipt this Period: 3000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Society of Independent Gasoline

Mailing Address 11495 Sunset Hills Road
Suite 215

City Reston State VA Zip Code 20190

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt: 06 / 06 / 2008
Transaction ID: 80626.C16901
Amount of Each Receipt this Period: 2500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **6500.00**

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 27 / 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Southern Company PAC

Mailing Address 241 Ralph McGill Blvd., NE
Suite 830

City Atlanta State GA Zip Code 30308

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 06 / 30 / 2008
Transaction ID: 80708.C16984
 Amount of Each Receipt this Period 1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Step toe and Johnson

Mailing Address 1330 Connecticut Ave. NW

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 06 / 06 / 2008
Transaction ID: 80626.C16900
 Amount of Each Receipt this Period 1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
The GlaxoSmithKline PAC

Mailing Address 1500 K Street NW #650

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt 05 / 07 / 2008
Transaction ID: 80626.C16861
 Amount of Each Receipt this Period 1500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3500.00**

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 28 / 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
The Prudential Financial PAC

Mailing Address 1140 Connecticut Ave. NW
Suite 510

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 06 / 04 / 2008
Transaction ID: 80626.C16910
 Amount of Each Receipt this Period 1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
United Parcel Service PAC

Mailing Address 316 Pennsylvania Ave. SE

City Washington State DC Zip Code 20003

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 6458.72

Date of Receipt 06 / 30 / 2008
Transaction ID: 80708.C16975
 Amount of Each Receipt this Period 1958.72

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
United Parcel Service PAC

Mailing Address 316 Pennsylvania Ave. SE

City Washington State DC Zip Code 20003

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 8958.72

Date of Receipt 06 / 30 / 2008
Transaction ID: 80708.C16976
 Amount of Each Receipt this Period 2500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 5458.72

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 29 / 105
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
United StatesTeleom Assoc. PAC

Mailing Address 607 14th Street NW
Suite 400

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 1 5 / 2 0 0 8

Transaction ID: 80626.C16889

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
USAmobility, Inc PAC

Mailing Address 6677 Richmond Highway

City Alexandria State VA Zip Code 22306

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: 80626.C16904

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Vectren Employees Federal PAC

Mailing Address P.O. Box 209

City Evansville State IN Zip Code 47708

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 2 / 2 0 0 8

Transaction ID: 80502.C16790

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3000.00**

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 30 / 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Verizon Communications Inc. Good

Mailing Address Government Club PAC
1300 I Street, NW

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4500.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 3 0 / 2 0 0 8

Transaction ID: 80710.C17032

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1776 K Street NW

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 2 2 / 2 0 0 8

Transaction ID: 80708.C16996

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Zeneca Inc. PAC

Mailing Address 701 Pennsylvania Aveune, NW
Suite 500

City Washington State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 7500.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 2 2 / 2 0 0 8

Transaction ID: 80626.C16835

Amount of Each Receipt this Period
2500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **4500.00**

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 31 / 105
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.

Full Name (Last, First, Middle Initial)
Zimmer Inc. PAC

Mailing Address 801 Pennsylvania Ave. NW
Suite 245

City State Zip Code
Washington DC 20004

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 0 8

Transaction ID: 80429.C16781

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	117958.72

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 105
(check only one)

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

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.

Full Name (Last, First, Middle Initial)
James Andrew

Mailing Address 620 Central Avenue

City State Zip Code
Lafayette IN 47905

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

Name of Employer Occupation
Henry Poor Lumber Co. owner

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 3 / 2 0 0 8

Transaction ID: 80708.C16972

Amount of Each Receipt this Period
500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Mike Beard

Mailing Address 4249 N. 450 W.

City State Zip Code
Frankfort IN 46041

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

Name of Employer Occupation
self Farmer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 2 2 / 2 0 0 8

Transaction ID: 80626.C16833

Amount of Each Receipt this Period
500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Craig Bernfield

Mailing Address 1755 Overland Trail

City State Zip Code
Deerfield IL 60015

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

Name of Employer Occupation
AVIV CEO

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 8

Transaction ID: 80708.C16985

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **2000.00**

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 33 / 105
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Carlos Berrios

Mailing Address 9560 Irishmans Run Lane

City State Zip Code
Zionsville IN 46077

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

Name of Employer self Occupation Physician

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 8

Transaction ID: 80710.C17010

Amount of Each Receipt this Period
500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 6180 West 1100 North

City State Zip Code
Demotte IN 46310

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

Name of Employer Fair Oaks Dairy Farm Occupation Partner

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 80708.C16926

Amount of Each Receipt this Period
300.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 220 Sheffield Rd.

City State Zip Code
West Lafayette IN 47906

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

Name of Employer Occupation retired

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 0 8

Transaction ID: 80708.C16963

Amount of Each Receipt this Period
250.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1050.00**

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 34 / 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Jonathon Borenstein

Mailing Address 350 Shirley Road

City Birmingham State MI Zip Code 48009

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

Name of Employer Honigman Miller Schwartz Cohn Occupation Attorney

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼

Date of Receipt 06 / 06 / 2008
Transaction ID: 80708.C16987
 Amount of Each Receipt this Period 1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 34038 Glouster Circle

City Farmington State MI Zip Code 48331

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

Name of Employer Occupation Homemaker

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼

Date of Receipt 06 / 06 / 2008
Transaction ID: 80708.C16986
 Amount of Each Receipt this Period 1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1612 North River Rd.

City West Lafayette State IN Zip Code 47906

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

Name of Employer Purdue University Occupation Professor

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼

Date of Receipt 06 / 23 / 2008
Transaction ID: 80708.C16957
 Amount of Each Receipt this Period 250.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **2250.00**

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 35 / 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
David Brokaw
 Mailing Address 5511 East Pleasant Run Pkwy S Dr.
 City Indianapolis State IN Zip Code 46219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation Physician
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
 Date of Receipt 06 / 30 / 2008
Transaction ID: 80710.C17011
 Amount of Each Receipt this Period 500.00
 Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Richard Campagna
 Mailing Address 4208 Chapra Drive
 City Wilmington State NC Zip Code 28412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00
 Date of Receipt 06 / 13 / 2008
Transaction ID: 80626.C16911
 Amount of Each Receipt this Period 1000.00
 Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Elizabeth Carpenter
 Mailing Address 2170 Tecumseh Park Lane
 City West Lafayette State IN Zip Code 47906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation retired
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 200.00
 Date of Receipt 06 / 23 / 2008
Transaction ID: 80708.C16928
 Amount of Each Receipt this Period 100.00
 Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1600.00
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 36 / 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Dr. W. Kelley Carr

Mailing Address 6 Hitching Post Rd.

City State Zip Code
West Lafayette IN 47906

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

Name of Employer Consultant Firm Occupation self

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1550.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 3 / 2 0 0 8

Transaction ID: 80708.C16973

Amount of Each Receipt this Period
800.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 3704 Greenfield Lane

City State Zip Code
West Lafayette IN 47906

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

Name of Employer Occupation retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 125.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 3 / 2 0 0 8

Transaction ID: 80708.C16945

Amount of Each Receipt this Period
125.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 3704 Greenfield Lane

City State Zip Code
West Lafayette IN 47906

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

Name of Employer Occupation retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 3 / 2 0 0 8

Transaction ID: 80708.C16944

Amount of Each Receipt this Period
125.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1050.00**

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 37 / 105

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 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)
Hoosiers Supporting Buyer For Congress

A.

Full Name (Last, First, Middle Initial)
Kathleen Clark

Mailing Address 9202 East 600 South

City State Zip Code
Zionsville IN 46077

FEC ID number of contributing federal political committee. C

Name of Employer Sommer Barnard Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 05 / 15 / 2008

Transaction ID: 80626.C16886

Amount of Each Receipt this Period 250.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Robert Clayton

Mailing Address 11410 East 300 North

City State Zip Code
Sheridan IN 46069

FEC ID number of contributing federal political committee. C

Name of Employer self Occupation
Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 06 / 30 / 2008

Transaction ID: 80710.C17012

Amount of Each Receipt this Period 500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Larry Contos

Mailing Address 108 Beauvoir Circle

City State Zip Code
Anderson IN 46011

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 05 / 15 / 2008

Transaction ID: 80626.C16887

Amount of Each Receipt this Period 250.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 1000.00

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 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.

Full Name (Last, First, Middle Initial)
Michael Coscia

Mailing Address 7200 Hull Road

City State Zip Code
Zionsville IN 46077

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

Name of Employer self Occupation
self Physician

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 8

Transaction ID: 80710.C17013

Amount of Each Receipt this Period

500.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Renn Crichlow

Mailing Address 12273 Bridgewater Road

City State Zip Code
Indianapolis IN 46256

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

Name of Employer self Occupation
self Physician

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 8

Transaction ID: 80710.C17014

Amount of Each Receipt this Period

500.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
James Davis

Mailing Address 2337 N. Untaluti

City State Zip Code
Monticello IN 47960

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

Name of Employer self Occupation
retired

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1050.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 0 8

Transaction ID: 80626.C16853

Amount of Each Receipt this Period

250.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1250.00

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 39 / 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Ken Davis

Mailing Address P.O. Box 767

City Francesville State IN Zip Code 47946

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

Name of Employer Not Employed Occupation retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt 05 / 07 / 2008
Transaction ID: 80626.C16873
 Amount of Each Receipt this Period 200.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1005 Highland Ave.

City Lafayette State IN Zip Code 47905

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

Name of Employer Van Ausdall & Farrar Occupation sales

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 06 / 23 / 2008
Transaction ID: 80708.C16968
 Amount of Each Receipt this Period 250.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Del Demaree

Mailing Address 5511 Four Mile Dr.

City Kokomo State IN Zip Code 46903-3831

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

Name of Employer Syndicate Sales Occupation Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 450.00

Date of Receipt 05 / 15 / 2008
Transaction ID: 80626.C16884
 Amount of Each Receipt this Period 250.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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 40 / 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Timothy Dicke

Mailing Address 7373 South Ford Road

City State Zip Code
Zionsville IN 46077

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

Name of Employer self Occupation
self Physician

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2008

Transaction ID: 80710.C17029

Amount of Each Receipt this Period
500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 5555 North Washington Blvd.

City State Zip Code
Indianapolis IN 46220

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

Name of Employer self Occupation
self Physician

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2008

Transaction ID: 80710.C17031

Amount of Each Receipt this Period
600.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address

City State Zip Code

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

Name of Employer self Occupation
self Physician

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2008

Transaction ID: 80710.C17030

Amount of Each Receipt this Period
500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1600.00**

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 41 / 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Robert Dotchin

Mailing Address 412 North St. Asaph St.

City State Zip Code
Alexandria VA 22314

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

Name of Employer: Advocacy Group Occupation: Consultant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 500.00

Date of Receipt: 04 / 25 / 2008
Transaction ID: 80522.C16828

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address P.O. Box 1129

City State Zip Code
Granger IN 46530

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

Name of Employer: self Occupation: Dentist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 250.00

Date of Receipt: 05 / 15 / 2008
Transaction ID: 80708.C16995

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address P.O. Box 1129

City State Zip Code
Granger IN 46530

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

Name of Employer: self Occupation: Dentist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 500.00

Date of Receipt: 05 / 15 / 2008
Transaction ID: 80626.C16885

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **1000.00**

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 42 / 105
(check only one)

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

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.

Full Name (Last, First, Middle Initial)
Daniel Dro

Mailing Address 10708 Lakeview Drive

City State Zip Code
Carmel IN 46033

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

Name of Employer self Occupation Physician

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 8

Transaction ID: 80710.C17002

Amount of Each Receipt this Period
250.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Charles Dye

Mailing Address 1809 Happy Hollow Rd.

City State Zip Code
West Lafayette IN 47906

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

Name of Employer Not Employed Occupation retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 3 / 2 0 0 8

Transaction ID: 80708.C16931

Amount of Each Receipt this Period
125.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Charles Dye

Mailing Address 1809 Happy Hollow Rd.

City State Zip Code
West Lafayette IN 47906

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

Name of Employer Not Employed Occupation retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 3 / 2 0 0 8

Transaction ID: 80708.C16930

Amount of Each Receipt this Period
125.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **500.00**

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 43 / 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Robert Falender
Mailing Address 10419 Trewithen Lane
City State Zip Code
Carmel IN 46032
FEC ID number of contributing federal political committee. **C**
Name of Employer self Occupation
self Physician
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt
M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 8
Transaction ID: 80710.C17001
Amount of Each Receipt this Period
250.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
David Farr
Mailing Address 11407 Forest Knoll Circle
City State Zip Code
Fishers IN 46038
FEC ID number of contributing federal political committee. **C**
Name of Employer self Occupation
self Physician
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 300.00
Date of Receipt
M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 8
Transaction ID: 80710.C17004
Amount of Each Receipt this Period
300.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Jack Farr
Mailing Address 5287 N. 400 W.
City State Zip Code
Bargersville IN 46106
FEC ID number of contributing federal political committee. **C**
Name of Employer self Occupation
self doctor
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt
M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 8
Transaction ID: 80710.C17009
Amount of Each Receipt this Period
500.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1050.00
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 44 / 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Douglas Fenstermaker

Mailing Address 25 E. Superior Ave.

City State Zip Code
Chicago IL 60611

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

Name of Employer Occupation
Stockcamp & Assoc. Consultant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	1	/	2	0	0	8

Transaction ID: 80522.C16825

Amount of Each Receipt this Period
250.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 351 Breakwater Drive

City State Zip Code
Fishers IN 46038

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

Name of Employer Occupation
self Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	8

Transaction ID: 80710.C17006

Amount of Each Receipt this Period
500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Vincent Fragomeni

Mailing Address 1042 Red Oak Drive

City State Zip Code
Avon IN 46123

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

Name of Employer Occupation
self Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	8

Transaction ID: 80710.C17003

Amount of Each Receipt this Period
300.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1050.00**

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 45 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.

Full Name (Last, First, Middle Initial)

John Gambs

Mailing Address 10101 South East

City State Zip Code
Lafayette IN 47909

FEC ID number of contributing federal political committee.

C

Name of Employer self

Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 0 8

Transaction ID: 80708.C16960

Amount of Each Receipt this Period

250.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Dennis Gernhardt

Mailing Address 1410 Castle Drive

City State Zip Code
Lafayette IN 47905

FEC ID number of contributing federal political committee.

C

Name of Employer DeFouw Chevrolet

Occupation owner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 0 8

Transaction ID: 80626.C16855

Amount of Each Receipt this Period

300.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Michael Gibson

Mailing Address 713 Red Oaks Lane

City State Zip Code
Lafayette IN 47909

FEC ID number of contributing federal political committee.

C

Name of Employer owner

Occupation Mulhaupt, Inc.

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 0 8

Transaction ID: 80708.C16970

Amount of Each Receipt this Period

300.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

850.00

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 46 / 105
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 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)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) Michael Gilpatrick	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 4203 Waterbrook Way	Transaction ID: 80710.C17024
	City Greenwood State IN Zip Code 46143	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer self Occupation Physician Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) Robert Griffin	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 11306 Manitou Court	Transaction ID: 80710.C17025
	City Indianapolis State IN Zip Code 46236	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer self Occupation Physician Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) Scott Gudeman	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 3132 Golfview Drive	Transaction ID: 80710.C17026
	City Greenwood State IN Zip Code 46143	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer self Occupation Physician Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	1500.00
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 47 / 105
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 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)
Hoosiers Supporting Buyer For Congress

A.

Full Name (Last, First, Middle Initial)
William Hamlin

Mailing Address P.O. Box 592

City State Zip Code
Garner NC 27529

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2008

Transaction ID: 80708.C16979

Amount of Each Receipt this Period
500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Joseph Huffman

Mailing Address 519 Burlington Ave.

City State Zip Code
Logansport IN 46947

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

Name of Employer Not Employed Occupation
retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
05 / 07 / 2008

Transaction ID: 80626.C16854

Amount of Each Receipt this Period
250.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Timothy Hupfer

Mailing Address 7373 Holliday Dr. East

City State Zip Code
Indianapolis IN 46260

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

Name of Employer self Occupation
Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2008

Transaction ID: 80710.C17027

Amount of Each Receipt this Period
500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

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 48 / 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Raymond Ingham
Mailing Address 217 East Drive
City Lebanon State IN Zip Code 46052
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation Pres./CEO
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt 05 / 07 / 2008
Transaction ID: 80626.C16847
Amount of Each Receipt this Period 250.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Bradley Jelen
Mailing Address 6261 Lancaster Place
City Zionsville State IN Zip Code 46077
FEC ID number of contributing federal political committee. **C**
Name of Employer self Occupation Physician
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt 06 / 30 / 2008
Transaction ID: 80710.C17028
Amount of Each Receipt this Period 500.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Jane Keller
Mailing Address 9846 Buttontown Lane
City Zionsville State IN Zip Code 46077
FEC ID number of contributing federal political committee. **C**
Name of Employer Ortholndy Occupation CEO
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt 06 / 30 / 2008
Transaction ID: 80710.C17000
Amount of Each Receipt this Period 250.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1000.00
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 49 / 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Daniel Kendrick

Mailing Address 441 Lourdes Lane

City State Zip Code
Lafayette IN 47905

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

Name of Employer Occupation
retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	3	/	2	0	0	8

Transaction ID: 80708.C16964

Amount of Each Receipt this Period
250.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 4106 Amesbury Drive

City State Zip Code
West Lafayette IN 47906

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	3	/	2	0	0	8

Transaction ID: 80708.C16967

Amount of Each Receipt this Period
250.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Steve Klink

Mailing Address 400 S. 7th Street

City State Zip Code
Lafayette IN 47901

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

Name of Employer Occupation
self business owner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	3	/	2	0	0	8

Transaction ID: 80708.C16924

Amount of Each Receipt this Period
250.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **750.00**

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 50 / 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Debra Kornahrens

Mailing Address 1950 NW 22nd Street

City State Zip Code
Fort Lauderdale FL 33311

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 1 3 / 2 0 0 8

Transaction ID: 80708.C16918

Amount of Each Receipt this Period
2300.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1950 NW 2nd Street

City State Zip Code
Fort Lauderdale FL 33311

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 1 4 / 2 0 0 8

Transaction ID: 80708.C16917

Amount of Each Receipt this Period
2300.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 9250 Willowrun Dr.

City State Zip Code
Indianapolis IN 46260

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

Name of Employer self Occupation
Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 3 0 / 2 0 0 8

Transaction ID: 80710.C17016

Amount of Each Receipt this Period
500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **5100.00**

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 51 / 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
James Krampen
Mailing Address 303 Congressional Blvd.
City State Zip Code
Carmel IN 46032
FEC ID number of contributing federal political committee. **C**
Name of Employer Seven Corner Inc. Occupation insurance executive
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt 05 / 22 / 2008
Transaction ID: 80626.C16838
Amount of Each Receipt this Period 250.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Thomas Laux
Mailing Address P.O. Box 1906
City State Zip Code
Martinsville IN 46151
FEC ID number of contributing federal political committee. **C**
Name of Employer Morgan Hospital Occupation President
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00
Date of Receipt 05 / 22 / 2008
Transaction ID: 80626.C16832
Amount of Each Receipt this Period 400.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Daniel Lehman
Mailing Address 7632 Almaden Court
City State Zip Code
Indianapolis IN 46278
FEC ID number of contributing federal political committee. **C**
Name of Employer self Occupation Physician
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt 06 / 30 / 2008
Transaction ID: 80710.C17017
Amount of Each Receipt this Period 500.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1150.00
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 52 / 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Dean Maar

Mailing Address 9250 Willowrun Drive

City Indianapolis State IN Zip Code 46260

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

Name of Employer self Occupation Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 06 / 30 / 2008
Transaction ID: 80710.C17015
 Amount of Each Receipt this Period 500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 5817 N Cedar Springs Rd.

City Muncie State IN Zip Code 47304

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

Name of Employer self Occupation Dentist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 06 / 06 / 2008
Transaction ID: 80626.C16897
 Amount of Each Receipt this Period 250.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Douglas Mansfield

Mailing Address 4505 Sugar Maple Drive

City Lafayette State IN Zip Code 47905

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 06 / 23 / 2008
Transaction ID: 80708.C16966
 Amount of Each Receipt this Period 250.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

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 53 / 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Robert Marske

Mailing Address 8342 Eagle Crest Lane

City Indianapolis State IN Zip Code 46234

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

Name of Employer self Occupation Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 06 / 30 / 2008
Transaction ID: 80710.C16999
 Amount of Each Receipt this Period 250.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1 North Federal Highway Suite 500

City Boca Raton State FL Zip Code 33432

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt 06 / 13 / 2008
Transaction ID: 80708.C16915
 Amount of Each Receipt this Period 2300.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Randall Mays

Mailing Address 12525 N. LA Belle Court

City MeQuon State WI Zip Code 53092

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

Name of Employer Dynamic Grape Occupation Consultant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt 06 / 14 / 2008
Transaction ID: 80708.C16922
 Amount of Each Receipt this Period 2300.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **4850.00**

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 54 / 105
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.

Full Name (Last, First, Middle Initial)
Chris Meyer

Mailing Address P. O. Box 6262

City State Zip Code
Lafayette IN 47903

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

Name of Employer self Occupation
self Attorney

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 23 / 2008

Transaction ID: 80708.C16937

Amount of Each Receipt this Period
125.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Chris Meyer

Mailing Address P. O. Box 6262

City State Zip Code
Lafayette IN 47903

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

Name of Employer self Occupation
self Attorney

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 23 / 2008

Transaction ID: 80708.C16936

Amount of Each Receipt this Period
125.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Richard Milanese

Mailing Address 17832 Key Vista Way

City State Zip Code
Boca Raton FL 33496

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

Name of Employer self Occupation
self

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 30 / 2008

Transaction ID: 80708.C16981

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

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 55 / 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Maxine Miller

Mailing Address 1212 Wea Ave.

City State Zip Code
Lafayette IN 47905

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

Name of Employer Occupation
retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 2 3 / 2 0 0 8

Transaction ID: 80710.C17034

Amount of Each Receipt this Period
200.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 525 Bolderwood Lane

City State Zip Code
Carmel IN 46032

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

Name of Employer Occupation
self Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 3 0 / 2 0 0 8

Transaction ID: 80710.C17023

Amount of Each Receipt this Period
500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 58 Thise Court

City State Zip Code
Lafayette IN 47905

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

Name of Employer Occupation
retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 7 / 2 0 0 8

Transaction ID: 80626.C16849

Amount of Each Receipt this Period
100.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **800.00**

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 56 / 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

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

Mailing Address 58 Thise Court

City State Zip Code
Lafayette IN 47905

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

Name of Employer Occupation
retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 650.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 2 3 / 2 0 0 8

Transaction ID: 80710.C17033

Amount of Each Receipt this Period
250.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 5726 Central Ave.

City State Zip Code
Indianapolis IN 46220

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

Name of Employer Occupation
self Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 3 0 / 2 0 0 8

Transaction ID: 80710.C17021

Amount of Each Receipt this Period
500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1919 West Cook Road

City State Zip Code
Fort Wayne IN 46866

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

Name of Employer Occupation
ITT Aerospace/Communications Business

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 2 4 / 2 0 0 8

Transaction ID: 80522.C16801

Amount of Each Receipt this Period
100.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **850.00**

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 57 / 105
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) Joshua Opperer	Date of Receipt MM / DD / YYYY 06 / 06 / 2008
	Mailing Address 12927 Nadine Ave.	Transaction ID: 80708.C16988
	City State Zip Code Huntington Woods MI 48070	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Honigman Miller Schwartz Cohn	Occupation Attorney	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Charles Pechette	Date of Receipt MM / DD / YYYY 06 / 14 / 2008
	Mailing Address 1018 Sagatoga Circle	Transaction ID: 80708.C16921
	City State Zip Code Indianapolis IN 46280	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Henry Plaster III	Date of Receipt MM / DD / YYYY 04 / 23 / 2008
	Mailing Address 5407 Albemable Street	Transaction ID: 80522.C16827
	City State Zip Code Bethesda MD 20816	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Plaster & Assoc.	Occupation Govt Relations Rep.	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	1750.00
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 58 / 105
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Devon Querry

Mailing Address P.O. Box 626

City State Zip Code
Monon IN 47959

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

Name of Employer Occupation
retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2008

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 0 8

Transaction ID: 80626.C16852

Amount of Each Receipt this Period
200.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 213 Vermont Dr.

City State Zip Code
Lafayette IN 47904

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

Name of Employer Occupation
Raisor Ford owner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2008

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 3 / 2 0 0 8

Transaction ID: 80708.C16940

Amount of Each Receipt this Period
125.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 213 Vermont Dr.

City State Zip Code
Lafayette IN 47904

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

Name of Employer Occupation
Raisor Ford owner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2008

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 3 / 2 0 0 8

Transaction ID: 80708.C16941

Amount of Each Receipt this Period
125.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **450.00**

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 59 / 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.

Full Name (Last, First, Middle Initial)
Joseph Riina

Mailing Address 10513 Shafer Court

City State Zip Code
Carmel IN 46033

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

Name of Employer self Occupation
self Physician

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 30 / 2008

Transaction ID: 80710.C17020

Amount of Each Receipt this Period
500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Orion Rust

Mailing Address 1116 Prospect Ln.

City State Zip Code
Orefield PA 18069

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

Name of Employer self Occupation
self Physician

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 30 / 2008

Transaction ID: 80708.C16977

Amount of Each Receipt this Period
250.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Daniel Sargeant

Mailing Address 2101 Spanish River Road

City State Zip Code
Boca Raton FL 33432

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

Name of Employer self Occupation

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 13 / 2008

Transaction ID: 80626.C16912

Amount of Each Receipt this Period
2300.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3050.00**

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 60 / 105
(check only one)

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

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.

Full Name (Last, First, Middle Initial)
Madelyn Sargeant

Mailing Address 2101 Spanish River Road

City State Zip Code
Boca Raton FL 33432

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 80626.C16913

Amount of Each Receipt this Period
2300.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
John Scheumann

Mailing Address P.O. Box 811

City State Zip Code
Lafayette IN 47902

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

Name of Employer Occupation
Crossman Communities CEO/CFO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 0 8

Transaction ID: 80708.C16961

Amount of Each Receipt this Period
250.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Thomas Schilli

Mailing Address 1580 Kepner Drive

City State Zip Code
Lafayette IN 47905

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

Name of Employer Occupation
Schilli Transportation President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 1 5 / 2 0 0 8

Transaction ID: 80626.C16883

Amount of Each Receipt this Period
200.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **2750.00**

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 61 / 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Charles Scholer

Mailing Address 807 Essex St.

City State Zip Code
West Lafayette IN 47906

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

Name of Employer Occupation
retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 3 / 2 0 0 8

Transaction ID: 80708.C16955

Amount of Each Receipt this Period
200.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1621 Skyline Road

City State Zip Code
Lafayette IN 47905

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

Name of Employer Occupation
self builder

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 3 / 2 0 0 8

Transaction ID: 80710.C17035

Amount of Each Receipt this Period
500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1879 Limehouse Dr.

City State Zip Code
Carmel IN 46032

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

Name of Employer Occupation
self Physician

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 8

Transaction ID: 80710.C17019

Amount of Each Receipt this Period
500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1200.00**

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 62 / 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

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

Mailing Address 11690 East ST. RD. 334

City State Zip Code
Zionsville IN 46077

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

Name of Employer self Occupation
self Physician

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 30 / 2008

Transaction ID: 80710.C17018

Amount of Each Receipt this Period
500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address P.O. Box 33

City State Zip Code
Logansport IN 46947

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

Name of Employer Slussers Greenthumb, Inc. Occupation
Self Employed

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
05 / 07 / 2008

Transaction ID: 80626.C16851

Amount of Each Receipt this Period
200.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 5712 Beisinger Place

City State Zip Code
Indianapolis IN 46237

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

Name of Employer self Occupation
self Physician

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 30 / 2008

Transaction ID: 80710.C16997

Amount of Each Receipt this Period
250.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **950.00**

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 63 / 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Jeanette Stokely
Mailing Address P.O. Box 5099

City State Zip Code
Zionsville IN 46077

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

Name of Employer Occupation
retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 7 / 2 0 0 8

Transaction ID: 80626.C16850

Amount of Each Receipt this Period
100.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Robert Stone
Mailing Address 5975 Wing Lake Road

City State Zip Code
Bloomfield Hills MI 48301

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

Name of Employer Occupation
Excelcare Management, Inc. Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 0 6 / 2 0 0 8

Transaction ID: 80708.C16989

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Franklin Taylor
Mailing Address 13027 West Bluff Creek Drive

City State Zip Code
Los Angeles CA 90094

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

Name of Employer Occupation
JWO Corp. Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 0 6 / 2 0 0 8

Transaction ID: 80708.C16990

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **2100.00**

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 64 / 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Andrew Vicar
Mailing Address 8934 Dandy Creek Drive
City Indianapolis State IN Zip Code 46234
FEC ID number of contributing federal political committee. **C**
Name of Employer self Occupation Physician
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Date of Receipt 06 / 30 / 2008
Transaction ID: 80710.C17022
Amount of Each Receipt this Period 500.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Dan Vierk
Mailing Address 4350 Soldiers Home Rd.
City West Lafayette State IN Zip Code 47906
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Date of Receipt 06 / 23 / 2008
Transaction ID: 80708.C16958
Amount of Each Receipt this Period 250.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Clement Wang
Mailing Address 1366 Talnuck Circle
City Fishers State IN Zip Code 46037
FEC ID number of contributing federal political committee. **C**
Name of Employer self Occupation Physician
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Date of Receipt 06 / 30 / 2008
Transaction ID: 80710.C17005
Amount of Each Receipt this Period 400.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1150.00
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 65 / 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Jeffrey Wellek
Mailing Address 1414 Sheridan Road
City Highland Park State IL Zip Code 60035
FEC ID number of contributing federal political committee. **C**
Name of Employer Focus Products Group Occupation Executive
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt 06 / 06 / 2008
Transaction ID: 80708.C16991
Amount of Each Receipt this Period 1000.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Jeffery Whitaker
Mailing Address 9785 Soaring Hawk Circle
City Zionsville State IN Zip Code 46077
FEC ID number of contributing federal political committee. **C**
Name of Employer self Occupation Physician
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt 06 / 30 / 2008
Transaction ID: 80710.C17007
Amount of Each Receipt this Period 500.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Terrance Wilson
Mailing Address 5380 Gardenia Court
City West Lafayette State IN Zip Code 47906
FEC ID number of contributing federal political committee. **C**
Name of Employer St. Francis Health Services Occupation administrator
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt 06 / 23 / 2008
Transaction ID: 80708.C16969
Amount of Each Receipt this Period 250.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1750.00
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 66 / 105
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) Robert Woerner	Date of Receipt MM / DD / YYYY 06 / 23 / 2008
	Mailing Address 2741 North Salisbury Street	Transaction ID: 80708.C16965
	City State Zip Code West Lafayette IN 47906	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation retired	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Thomas Woo	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 6569 Greyridge Blvd.	Transaction ID: 80710.C17008
	City State Zip Code Indianapolis IN 46237	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation self Physician	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) R.D. Yost	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 502 Glenview Road	Transaction ID: 80708.C16983
	City State Zip Code Bryn Mawr PA 19010	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation AmerisourceBergen CEO	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)	▶	2750.00
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 67 / 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Kay-Ghobad Zafar

Mailing Address 4611 Beverly Drive

City State Zip Code
Dallas TX 75209

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 1 3 / 2 0 0 8

Transaction ID: 80626.C16914

Amount of Each Receipt this Period
2300.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 2509 Redfree Drive

City State Zip Code
West Lafayette IN 47906

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

Name of Employer Occupation
Caterpillar Manager

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 125.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 3 / 2 0 0 8

Transaction ID: 80708.C16935

Amount of Each Receipt this Period
125.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 2509 Redfree Drive

City State Zip Code
West Lafayette IN 47906

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

Name of Employer Occupation
Caterpillar Manager

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 3 / 2 0 0 8

Transaction ID: 80708.C16934

Amount of Each Receipt this Period
125.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **2550.00**

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 68 / 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Jason Zimmerman
 Mailing Address P.O. Box 2168
 City State Zip Code
 Columbus OH 43216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Schechter Wealth Strategies
 Occupation Executive
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 1 4 / 2 0 0 8
Transaction ID: 80708.C16923
 Amount of Each Receipt this Period
 1000.00
 Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Richard Zuckerman
 Mailing Address P.O. Box 294
 City State Zip Code
 Point Lookout NY 11569
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Lesser, Leff & Company
 Occupation CPA
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 2 4 / 2 0 0 8
Transaction ID: 80522.C16798
 Amount of Each Receipt this Period
 500.00
 Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	▶	1500.00
TOTAL This Period (last page this line number only)	▶	58400.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 69 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.

Full Name (Last, First, Middle Initial)
Bill McCormick for Commissioner

Mailing Address P.O. Box 108

City State Zip Code
Crawfordsville IN 47933

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 2 / 2 0 0 8

Transaction ID: 80626.C16840

Amount of Each Receipt this Period
300.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
John Dennis for Mayor

Mailing Address P.O. Box 2263

City State Zip Code
West Lafayette IN 47906

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

Name of Employer Occupation
West Lafayette Mayor

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 125.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 0 8

Transaction ID: 80708.C16953

Amount of Each Receipt this Period
125.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
John Knochel for Commissioner

Mailing Address P.O. Box 706

City State Zip Code
Lafayette IN 47902

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 0 8

Transaction ID: 80708.C16959

Amount of Each Receipt this Period
250.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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 70 / 105	
	(check only one)			
<input type="checkbox"/> 11a	<input checked="" type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 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)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) Walsh for Congress Committee		Date of Receipt																					
	Mailing Address 306 Winkworth Pkwy.		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	9		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	4		2	9		2	0	0	8														
	City State Zip Code Syracuse NY 13215		Transaction ID: 80429.C16783																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00																						
Name of Employer Occupation		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)																						
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00																						

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	1675.00

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

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

FOR LINE NUMBER: PAGE 71 / 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Lafayette Bank & Trust

Mailing Address P.O. Box 1130

City State Zip Code
Lafayette IN 47902-

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 436.03

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 1 7 / 2 0 0 8

Transaction ID: 80425.C16771

Amount of Each Receipt this Period
12.06

Other Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Note: interest from CD

B. Full Name (Last, First, Middle Initial)
Lafayette Bank & Trust

Mailing Address P.O. Box 1130

City State Zip Code
Lafayette IN 47902-

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 443.63

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 0 8 / 2 0 0 8

Transaction ID: 80522.C16797

Amount of Each Receipt this Period
7.60

Other Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Note: interest from CD

C. Full Name (Last, First, Middle Initial)
Lafayette Bank & Trust

Mailing Address P.O. Box 1130

City State Zip Code
Lafayette IN 47902-

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 449.85

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 0 5 / 2 0 0 8

Transaction ID: 80626.C16882

Amount of Each Receipt this Period
6.22

Other Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Note: interest form CD

SUBTOTAL of Receipts This Page (optional) ► **25.88**

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 72 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.

Full Name (Last, First, Middle Initial)

Wells Fargo

Mailing Address 119 North Main Street

City State Zip Code
Monticello IN 47960-6748

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
8599.25

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 0 8

Transaction ID: 80522.C16796

Amount of Each Receipt this Period

13.43

Other Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Note: April interest

B.

Full Name (Last, First, Middle Initial)

Wells Fargo

Mailing Address 119 North Main Street

City State Zip Code
Monticello IN 47960-6748

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
8615.40

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 80708.C16994

Amount of Each Receipt this Period

16.15

Other Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Note: May interest

C.

Full Name (Last, First, Middle Initial)

Wells Fargo

Mailing Address 119 North Main Street

City State Zip Code
Monticello IN 47960-6748

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
9181.96

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 8

Transaction ID: 80710.C17037

Amount of Each Receipt this Period

566.56

Other Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

596.14

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 73 / 105	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.

Full Name (Last, First, Middle Initial) Wells Fargo		Date of Receipt
Mailing Address 119 North Main Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 30 / 2008
City	State	Zip Code
Monticello	IN	47960-6748
FEC ID number of contributing federal political committee.		Transaction ID: 80710.C17036
<input type="text"/> C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text"/> 17.08
Name of Employer	Occupation	Other Receipt
		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008	Election Cycle-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	<input type="text"/> 9199.04	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 17.08
TOTAL This Period (last page this line number only)	<input type="text"/> 639.10

**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)

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

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.

Full Name (Last, First, Middle Initial)
Adams Remco, Inc.

Mailing Address P.O. Box 3968

City State Zip Code
South Bend IN 46619-

Purpose of Disbursement
service contract
Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: 80522.E7676
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SERVICE CONTRACT

B.

Full Name (Last, First, Middle Initial)
Aristotle Industries

Mailing Address 205 Pennsylvania Avenue, S.E.

City State Zip Code
Washington DC 20003-1164

Purpose of Disbursement
technical support software
Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: 80708.E7731
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

TECHNICAL SUPPORT SOFTWARE

C.

Full Name (Last, First, Middle Initial)
Stephen Buyer

Mailing Address 200 North Main St.

City State Zip Code
Monticello IN 47960-

Purpose of Disbursement
reimb. for travel
Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: 80708.E7742
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

REIMB. FOR TRAVEL

SUBTOTAL of Disbursements This Page (optional)

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)

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

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) Capitol Hill Club <hr/> Mailing Address 300 1st. St., S.E. <hr/> City Washington State DC Zip Code 20003- <hr/> Purpose of Disbursement food & bev. expense Candidate Name Category/Type <hr/> 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) ▼	Transaction ID: 80522.E7694 Date of Disbursement 04 / 20 / 2008 <hr/> Amount of Each Disbursement this Period 362.75 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FOOD & BEV. EXPENSE
B.	Full Name (Last, First, Middle Initial) Capitol Hill Club <hr/> Mailing Address 300 1st. St., S.E. <hr/> City Washington State DC Zip Code 20003- <hr/> Purpose of Disbursement food & bev. expense Candidate Name Category/Type <hr/> 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) ▼	Transaction ID: 80626.E7708 Date of Disbursement 05 / 13 / 2008 <hr/> Amount of Each Disbursement this Period 1045.70 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FOOD & BEV. EXPENSE
C.	Full Name (Last, First, Middle Initial) Chrysler Financial <hr/> Mailing Address P.O. Box 55000 Dept. 203201 <hr/> City Detroit State MI Zip Code 48255- <hr/> Purpose of Disbursement lease payment Candidate Name Category/Type <hr/> 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) ▼	Transaction ID: 80626.E7700 Date of Disbursement 05 / 14 / 2008 <hr/> Amount of Each Disbursement this Period 422.80 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 LEASE PAYMENT

SUBTOTAL of Disbursements This Page (optional) ▶	1831.25
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)

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

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) Chrysler Financial Mailing Address P.O. Box 55000 Dept. 203201 City Detroit State MI Zip Code 48255- Purpose of Disbursement lease payment 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) ▼	Transaction ID: 80708.E7735 Date of Disbursement 05 / 30 / 2008 Amount of Each Disbursement this Period 476.54 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 LEASE PAYMENT
B.	Full Name (Last, First, Middle Initial) Comcast Mailing Address City Monticello State IN Zip Code 47960- Purpose of Disbursement cable service 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) ▼	Transaction ID: 80522.E7695 Date of Disbursement 04 / 17 / 2008 Amount of Each Disbursement this Period 57.90 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CABLE SERVICE
C.	Full Name (Last, First, Middle Initial) Comcast Mailing Address City Monticello State IN Zip Code 47960- Purpose of Disbursement cable service 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) ▼	Transaction ID: 80708.E7729 Date of Disbursement 05 / 30 / 2008 Amount of Each Disbursement this Period 58.43 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CABLE SERVICE

SUBTOTAL of Disbursements This Page (optional) ▶

592.87

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)

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

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) Corporate Card	Transaction ID: 80626.E7704 Date of Disbursement 05 / 07 / 2008
	Mailing Address P.O. Box 10347	Amount of Each Disbursement this Period 1784.12
	City Des Moines State IA Zip Code 50306-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement see below	
	Candidate Name	Category/Type
	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) ▼
		SEE BELOW

B.	Full Name (Last, First, Middle Initial) Bobby Van Steakhouse	Transaction ID: 80626.E7707 Date of Disbursement 05 / 07 / 2008
	Mailing Address 809 15th Street NW	Amount of Each Disbursement this Period 1696.50
	City Washington State DC Zip Code 20005-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement food & bev. expense	
	Candidate Name	Category/Type
	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) ▼
		[MEMO ITEM] MEMO: FOOD & BEV. EXPENSE

C.	Full Name (Last, First, Middle Initial) Fedex Ship	Transaction ID: 80626.E7705 Date of Disbursement 05 / 07 / 2008
	Mailing Address P.O. Box 1140 Dept. A	Amount of Each Disbursement this Period 52.62
	City Memphis State TN Zip Code 38101-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement shipping	
	Candidate Name	Category/Type
	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) ▼
		[MEMO ITEM] MEMO: SHIPPING

SUBTOTAL of Disbursements This Page (optional)	▶	1784.12
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)

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

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.

Full Name (Last, First, Middle Initial)
Corporate Card

Mailing Address P.O. Box 10347

City State Zip Code
Des Moines IA 50306-

Purpose of Disbursement
see below

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80708.E7720
Date of Disbursement

05 / 30 / 2008

Amount of Each Disbursement this Period

474.57

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SEE BELOW

B.

Full Name (Last, First, Middle Initial)
Family Express

Mailing Address

City State Zip Code
Lafayette IN 47902-

Purpose of Disbursement
gasoline

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80708.E7721
Date of Disbursement

05 / 30 / 2008

Amount of Each Disbursement this Period

73.01

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]
MEMO: GASOLINE

C.

Full Name (Last, First, Middle Initial)
Mail Inc.

Mailing Address P.O. Box 5685

City State Zip Code
Lafayette IN 47903-

Purpose of Disbursement
postage/ mailing expense

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80708.E7722
Date of Disbursement

05 / 30 / 2008

Amount of Each Disbursement this Period

401.31

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]
MEMO: POSTAGE/MAILING EXP-
ENSE

SUBTOTAL of Disbursements This Page (optional) ▶

474.57

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)

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

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial) Corporate Card Mailing Address P.O. Box 10347 City Des Moines State IA Zip Code 50306- Purpose of Disbursement see below 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) ▼	Transaction ID: 80708.E7771 Date of Disbursement 05 / 30 / 2008
	Amount of Each Disbursement this Period 4107.08
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	SEE BELOW

B. Full Name (Last, First, Middle Initial) Mail Inc. Mailing Address P.O. Box 5685 City Lafayette State IN Zip Code 47903- Purpose of Disbursement postage/ mailing expense 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) ▼	Transaction ID: 80708.E7774 Date of Disbursement 05 / 30 / 2008
	Amount of Each Disbursement this Period 1524.01
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	[MEMO ITEM] MEMO: POSTAGE/MAILING EXPENSE

C. Full Name (Last, First, Middle Initial) Monocle on Capital Hill Mailing Address 107 D Street, NE City Washington State DC Zip Code 20005- Purpose of Disbursement food & bev. expense 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) ▼	Transaction ID: 80708.E7773 Date of Disbursement 05 / 30 / 2008
	Amount of Each Disbursement this Period 337.78
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	[MEMO ITEM] MEMO: FOOD & BEV. EXPENSE

SUBTOTAL of Disbursements This Page (optional) ▶	4107.08
TOTAL This Period (last page this line number only) ▶	(Empty box)

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)

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

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.

Full Name (Last, First, Middle Initial)

Embarq

Mailing Address P.O. Box 74517

City Atlanta State GA Zip Code 30374-

Purpose of Disbursement
phone bill

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80522.E7696

Date of Disbursement

04 / 17 / 2008

Amount of Each Disbursement this Period

402.87

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

PHONE BILL

B.

Full Name (Last, First, Middle Initial)

Embarq

Mailing Address P.O. Box 74517

City Atlanta State GA Zip Code 30374-

Purpose of Disbursement
phone bill

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80708.E7730

Date of Disbursement

05 / 30 / 2008

Amount of Each Disbursement this Period

454.10

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

PHONE BILL

C.

Full Name (Last, First, Middle Initial)

GM Card

Mailing Address Dept. 9600

City Carol Stream State IL Zip Code 60128-

Purpose of Disbursement
see below

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80708.E7749

Date of Disbursement

05 / 07 / 2008

Amount of Each Disbursement this Period

3178.06

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

4035.03

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)

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

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.

Full Name (Last, First, Middle Initial)
Aardvark Electronics

Mailing Address 824 North 6th Street

City Monticello State IN Zip Code 47960-

Purpose of Disbursement office supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 80708.E7751
Date of Disbursement 05 / 07 / 2008

Amount of Each Disbursement this Period 66.62

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
MEMO: OFFICE SUPPLIES

B.

Full Name (Last, First, Middle Initial)
Amoco Gas Station

Mailing Address

City Lebanon State IN Zip Code 46052-

Purpose of Disbursement gasoline

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 80708.E7750
Date of Disbursement 05 / 07 / 2008

Amount of Each Disbursement this Period 184.89

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
MEMO: GASOLINE

C.

Full Name (Last, First, Middle Initial)
Arnis

Mailing Address 517 N. Main St.

City Monticello State IN Zip Code 47960-

Purpose of Disbursement food & bev. expense

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 80708.E7763
Date of Disbursement 05 / 07 / 2008

Amount of Each Disbursement this Period 136.43

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
MEMO: FOOD & BEV. EXPENSE

SUBTOTAL of Disbursements This Page (optional) ► 0.00

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)

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

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) Capital Grille	Transaction ID: 80708.E7754 Date of Disbursement 05 / 07 / 2008
	Mailing Address 601 Pennsylvania Ave., NW	Amount of Each Disbursement this Period 250.20
	City Washington State DC Zip Code 20004-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement food & bev. expense	[MEMO ITEM] MEMO: FOOD & BEV. EXPENSE
	Candidate Name	Category/Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Charlie Palmer Steak	Transaction ID: 80708.E7768 Date of Disbursement 05 / 07 / 2008
	Mailing Address 101 Constition Ave. NW	Amount of Each Disbursement this Period 745.80
	City Washington State DC Zip Code 20001-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement food & bev. expense	[MEMO ITEM] MEMO: FOOD & BEV. EXPENSE
	Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Family Express	Transaction ID: 80708.E7756 Date of Disbursement 05 / 07 / 2008
	Mailing Address	Amount of Each Disbursement this Period 121.50
	City Lafayette State IN Zip Code 47902-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement gasoline	[MEMO ITEM] MEMO: GASOLINE
	Candidate Name	Category/Type
	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)	0.00
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)

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

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Golf Shop</p> <p>Mailing Address</p> <p>City: Crawfordsville State: IN Zip Code: 47933-</p> <p>Purpose of Disbursement: fundraiser gifts</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80708.E7765</p> <p>Date of Disbursement: 05 / 07 / 2008</p> <p>Amount of Each Disbursement this Period: 205.20</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO: FUNDRAISER GIFTS</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Hudson News Cafe</p> <p>Mailing Address</p> <p>City: Washington State: DC Zip Code: 20004-</p> <p>Purpose of Disbursement: food & bev. expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80708.E7760</p> <p>Date of Disbursement: 05 / 07 / 2008</p> <p>Amount of Each Disbursement this Period: 42.92</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO: FOOD & BEV. EXPENSE</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Marathon Oil</p> <p>Mailing Address: 1541 W. Thompson Rd.</p> <p>City: Indianapolis State: IN Zip Code: 46241-</p> <p>Purpose of Disbursement: gasoline</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80708.E7770</p> <p>Date of Disbursement: 05 / 07 / 2008</p> <p>Amount of Each Disbursement this Period: 39.90</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO: GASOLINE</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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)

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

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.

Full Name (Last, First, Middle Initial)
Sgt. Prestons Catering

Mailing Address 6 N. 2nd Street

City Lafayette State IN Zip Code 47905-

Purpose of Disbursement
food & bev. expense

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80708.E7753

Date of Disbursement

05 / 07 / 2008

Amount of Each Disbursement this Period

718.32

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: FOOD & BEV. EXPENSE

B.

Full Name (Last, First, Middle Initial)
Speedway

Mailing Address 1291 N. Madison

City Greenwood State IN Zip Code 46142-

Purpose of Disbursement
gasoline

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80708.E7767

Date of Disbursement

05 / 07 / 2008

Amount of Each Disbursement this Period

66.31

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: GASOLINE

C.

Full Name (Last, First, Middle Initial)
Sportmans Inn

Mailing Address US 24 South

City Monticello State IN Zip Code 47960-

Purpose of Disbursement
food & bev. expense

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80708.E7764

Date of Disbursement

05 / 07 / 2008

Amount of Each Disbursement this Period

23.43

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: FOOD & BEV. EXPENSE

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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)

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

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) Tortilla Coast Mailing Address 400 First Street SE City Washington State DC Zip Code 20016- Purpose of Disbursement food & bev. expense 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) ▼	Transaction ID: 80708.E7769 Date of Disbursement 05 / 07 / 2008 Amount of Each Disbursement this Period 47.30 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: FOOD & BEV. EXPENSE
B.	Full Name (Last, First, Middle Initial) Wal-Mart Mailing Address St. Rd. 24 City Monticello State IN Zip Code 47960- Purpose of Disbursement fundraiser expense 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) ▼	Transaction ID: 80708.E7762 Date of Disbursement 05 / 07 / 2008 Amount of Each Disbursement this Period 94.38 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: FUNDRAISER EXPENSE
C.	Full Name (Last, First, Middle Initial) GM Card Mailing Address Dept. 9600 City Carol Stream State IL Zip Code 60128- Purpose of Disbursement see below 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) ▼	Transaction ID: 80708.E7743 Date of Disbursement 05 / 30 / 2008 Amount of Each Disbursement this Period 422.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SEE BELOW

SUBTOTAL of Disbursements This Page (optional) ▶

422.00

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)

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

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

<p>A. Full Name (Last, First, Middle Initial) Battlefield</p> <p>Mailing Address 5851 St. Rd. 43 N.</p> <p>City West Lafayette State IN Zip Code 47906-</p> <p>Purpose of Disbursement gasoline</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80626.E7719</p> <p>Date of Disbursement 05 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 180.45</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO: GASOLINE</p>
<p>B. Full Name (Last, First, Middle Initial) Family Express</p> <p>Mailing Address</p> <p>City Lafayette State IN Zip Code 47902-</p> <p>Purpose of Disbursement gasoline</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80626.E7718</p> <p>Date of Disbursement 05 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 56.88</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO: GASOLINE</p>
<p>C. Full Name (Last, First, Middle Initial) Holiday Inn Airport</p> <p>Mailing Address 2501 South High School Rd.</p> <p>City Indianapolis State IN Zip Code 46241-</p> <p>Purpose of Disbursement food & bev. expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80708.E7746</p> <p>Date of Disbursement 05 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 17.54</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO: FOOD & BEV. EXPENSE</p>

SUBTOTAL of Disbursements This Page (optional)	0.00
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)

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

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) Main Street Station	Transaction ID: 80708.E7748 Date of Disbursement 05 / 30 / 2008
	Mailing Address	Amount of Each Disbursement this Period 75.00
	City: Monticello State: IN Zip Code: 47960-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement: gasoline Candidate Name	[MEMO ITEM] MEMO: GASOLINE
	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) ▼	

B.	Full Name (Last, First, Middle Initial) Paradies	Transaction ID: 80708.E7744 Date of Disbursement 05 / 30 / 2008
	Mailing Address	Amount of Each Disbursement this Period 42.69
	City: Washington State: DC Zip Code: 20005-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement: gasoline Candidate Name	[MEMO ITEM] MEMO: GASOLINE
	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) ▼	

C.	Full Name (Last, First, Middle Initial) Shell Station	Transaction ID: 80708.E7747 Date of Disbursement 05 / 30 / 2008
	Mailing Address 1230 West St. Rd. 32	Amount of Each Disbursement this Period 104.64
	City: Lebanon State: IN Zip Code: 46052-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement: gasoline Candidate Name	[MEMO ITEM] MEMO: GASOLINE
	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)	0.00
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)

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

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.

Full Name (Last, First, Middle Initial)
Speedway

Mailing Address 1291 N. Madison

City Greenwood State IN Zip Code 46142-

Purpose of Disbursement
gasoline

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80708.E7745
Date of Disbursement

05 / 30 / 2008

Amount of Each Disbursement this Period

33.25

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]
MEMO: GASOLINE

B.

Full Name (Last, First, Middle Initial)
GM Card

Mailing Address Dept. 9600

City Carol Stream State IL Zip Code 60128-

Purpose of Disbursement
see Below

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80710.E7777
Date of Disbursement

06 / 04 / 2008

Amount of Each Disbursement this Period

2328.27

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SEE BELOW

C.

Full Name (Last, First, Middle Initial)
House Gift Shop

Mailing Address Longworth Bldg

City Washington State DC Zip Code 20515-

Purpose of Disbursement
fundraiser gifts

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80710.E7780
Date of Disbursement

06 / 04 / 2008

Amount of Each Disbursement this Period

39.18

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]
MEMO: FUNDRAISER GIFTS

SUBTOTAL of Disbursements This Page (optional)

2328.27

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)

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

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) Ruths Chris Steak	Transaction ID: 80710.E7779
	Mailing Address	Date of Disbursement 06 / 04 / 2008
	City: Washington State: DC Zip Code: 20001-	Amount of Each Disbursement this Period 1303.00
	Purpose of Disbursement: food & bev. expense	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	[MEMO ITEM] MEMO: FOOD & BEV. EXPENSE
	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:	

B.	Full Name (Last, First, Middle Initial) U.S. House Members Dinner	Transaction ID: 80710.E7778
	Mailing Address: B-217 Longworth Bldg.	Date of Disbursement 06 / 04 / 2008
	City: Washington State: DC Zip Code: 20002-	Amount of Each Disbursement this Period 63.00
	Purpose of Disbursement: food & bev. expense	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	[MEMO ITEM] MEMO: FOOD & BEV. EXPENSE
	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:	

C.	Full Name (Last, First, Middle Initial) Ind. Dept of Revenue	Transaction ID: 80522.E7684
	Mailing Address: 100 N. Senate Ave.	Date of Disbursement 04 / 17 / 2008
	City: Indianapolis State: IN Zip Code: 46204-	Amount of Each Disbursement this Period 48.28
	Purpose of Disbursement: payroll taxes	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	PAYROLL TAXES
	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)	48.28
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)

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

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) Ind. Dept of Revenue Mailing Address 100 N. Senate Ave. City Indianapolis State IN Zip Code 46204- Purpose of Disbursement payroll taxes 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) ▼	Transaction ID: 80626.E7699 Date of Disbursement 05 / 15 / 2008 Amount of Each Disbursement this Period 48.28 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PAYROLL TAXES
B.	Full Name (Last, First, Middle Initial) Indianapolis Convention & Visitors As Mailing Address One RCA Dome Suite 100 City Indianapolis State IN Zip Code 46225- Purpose of Disbursement facilities for fundraiser 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) ▼	Transaction ID: 80626.E7711 Date of Disbursement 05 / 01 / 2008 Amount of Each Disbursement this Period 3500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FACILITIES FOR FUNDRAISER
C.	Full Name (Last, First, Middle Initial) Indianapolis Convention & Visitors As Mailing Address One RCA Dome Suite 100 City Indianapolis State IN Zip Code 46225- Purpose of Disbursement food & bev. expense 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) ▼	Transaction ID: 80710.E7781 Date of Disbursement 06 / 04 / 2008 Amount of Each Disbursement this Period 2870.61 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FOOD & BEV. EXPENSE

SUBTOTAL of Disbursements This Page (optional) ▶	6418.89
TOTAL This Period (last page this line number only) ▶	(Empty box)

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)

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

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.

Full Name (Last, First, Middle Initial)
ITN

Mailing Address P.O. Box 839

City Monticello State IN Zip Code 47960-

Purpose of Disbursement internet service
Candidate Name

Category/Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 80626.E7703
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	4		2	0	0	8

Amount of Each Disbursement this Period

75.98

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

INTERNET SERVICE

B.

Full Name (Last, First, Middle Initial)
Marcias Flowers Cart

Mailing Address 512 Northwestern St.

City Monticello State IN Zip Code 47960-

Purpose of Disbursement flowers
Candidate Name

Category/Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 80708.E7726
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	0	8

Amount of Each Disbursement this Period

58.79

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

FLOWERS

C.

Full Name (Last, First, Middle Initial)
Stephanie Mattix

Mailing Address 200 N. Main St.

City Monticello State IN Zip Code 47960-

Purpose of Disbursement reimb. office supply
Candidate Name

Category/Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 80522.E7690
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	0		2	0	0	8

Amount of Each Disbursement this Period

46.50

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

REIMB. OFFICE SUPPLY

SUBTOTAL of Disbursements This Page (optional)

181.27

TOTAL This Period (last page this line number only)

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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)

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

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.

Full Name (Last, First, Middle Initial)
Stephanie Mattix

Transaction ID: 80522.E7674
Date of Disbursement

Mailing Address 200 N. Main St.

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	0	8

City Monticello State IN Zip Code 47960-

Amount of Each Disbursement this Period

873.16

Purpose of Disbursement payroll

--

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

PAYROLL

State: District:

B.

Full Name (Last, First, Middle Initial)
Stephanie Mattix

Transaction ID: 80626.E7715
Date of Disbursement

Mailing Address 200 N. Main St.

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	6		2	0	0	8

City Monticello State IN Zip Code 47960-

Amount of Each Disbursement this Period

749.40

Purpose of Disbursement reimb. fundraiser tickets

--

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

REIMB. FUNDRAISER TICKETS

State: District:

C.

Full Name (Last, First, Middle Initial)
Stephanie Mattix

Transaction ID: 80708.E7741
Date of Disbursement

Mailing Address 200 N. Main St.

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	0	8

City Monticello State IN Zip Code 47960-

Amount of Each Disbursement this Period

873.16

Purpose of Disbursement payroll

--

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

PAYROLL

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

2495.72

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

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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)

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

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

<p>A. Full Name (Last, First, Middle Initial) Stephanie Mattix</p> <p>Mailing Address 200 N. Main St.</p> <p>City Monticello State IN Zip Code 47960-</p> <p>Purpose of Disbursement payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80710.E7782</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="873.16"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>PAYROLL</p>
<p>B. Full Name (Last, First, Middle Initial) Monroe County GOP</p> <p>Mailing Address P.O. Box 235</p> <p>City Bloomington State IN Zip Code 47407-</p> <p>Purpose of Disbursement advertisement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80522.E7678</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="150.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>ADVERTISEMENT</p>
<p>C. Full Name (Last, First, Middle Initial) Monticello Water & Sewer Departments</p> <p>Mailing Address P.O. Box 384</p> <p>City Monticello State IN Zip Code 47960-</p> <p>Purpose of Disbursement water bill</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80522.E7689</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="31.42"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>WATER BILL</p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1054.58"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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)

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

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.

Full Name (Last, First, Middle Initial)
Monticello Water & Sewer Departments

Mailing Address P.O. Box 384

City Monticello State IN Zip Code 47960-

Purpose of Disbursement
water bill

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 80626.E7698

Date of Disbursement

05 / 16 / 2008

Amount of Each Disbursement this Period

31.42

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

WATER BILL

B.

Full Name (Last, First, Middle Initial)
Morgan, Meredith & Assoc.

Mailing Address 2875 Towerview Road Suite 100

City Herndon State VA Zip Code 20171-

Purpose of Disbursement
fundraiser consultant

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 80522.E7693

Date of Disbursement

04 / 20 / 2008

Amount of Each Disbursement this Period

3333.66

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

FUNDRAISER CONSULTANT

C.

Full Name (Last, First, Middle Initial)
Morgan, Meredith & Assoc.

Mailing Address 2875 Towerview Road Suite 100

City Herndon State VA Zip Code 20171-

Purpose of Disbursement
fundraiser consultant

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 80626.E7712

Date of Disbursement

05 / 01 / 2008

Amount of Each Disbursement this Period

3449.39

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

FUNDRAISER CONSULTANT

SUBTOTAL of Disbursements This Page (optional) ▶

6814.47

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)

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

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.

Full Name (Last, First, Middle Initial)
Morgan, Meredith & Assoc.

Transaction ID: 80708.E7732
Date of Disbursement

Mailing Address 2875 Towerview Road
Suite 100

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	0	8

City Herndon State VA Zip Code 20171-

Amount of Each Disbursement this Period

3315.34

Purpose of Disbursement fundraiser consultant
Candidate Name

Category/
Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

FUNDRAISER CONSULTANT

B.

Full Name (Last, First, Middle Initial)
Nipsco

Transaction ID: 80715.E7784
Date of Disbursement

Mailing Address P.O. Box 13007

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	0		2	0	0	8

City Merrillville State IN Zip Code 46411-

Amount of Each Disbursement this Period

380.66

Purpose of Disbursement electric bill
Candidate Name

Category/
Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

ELECTRIC BILL

C.

Full Name (Last, First, Middle Initial)
Nipsco

Transaction ID: 80626.E7697
Date of Disbursement

Mailing Address P.O. Box 13007

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	1		2	0	0	8

City Merrillville State IN Zip Code 46411-

Amount of Each Disbursement this Period

387.56

Purpose of Disbursement electric bill
Candidate Name

Category/
Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

ELECTRIC BILL

SUBTOTAL of Disbursements This Page (optional)

4083.56

TOTAL This Period (last page this line number only)

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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)

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

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) Nipsco Mailing Address P.O. Box 13007 City Merrillville State IN Zip Code 46411- Purpose of Disbursement electric bill 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) ▼	Transaction ID: 80626.E7701 Date of Disbursement 05 / 16 / 2008 Amount of Each Disbursement this Period 179.58 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 ELECTRIC BILL
B.	Full Name (Last, First, Middle Initial) Pekin Insurance Company Mailing Address 2505 Court Street City Pekin State IL Zip Code 61558- Purpose of Disbursement rent insurance 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) ▼	Transaction ID: 80626.E7714 Date of Disbursement 05 / 01 / 2008 Amount of Each Disbursement this Period 249.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 RENT INSURANCE
C.	Full Name (Last, First, Middle Initial) Perkins Insurance Mailing Address 2505 Court Street City Pekin State IL Zip Code 61558- Purpose of Disbursement renters insurance 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) ▼	Transaction ID: 80522.E7679 Date of Disbursement 04 / 20 / 2008 Amount of Each Disbursement this Period 52.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 RENTERS INSURANCE

SUBTOTAL of Disbursements This Page (optional) ▶

480.58

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)

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

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) Postmaster	Transaction ID: 80522.E7683 Date of Disbursement
	Mailing Address 125 W. Broadway	<input type="text" value="04"/> / <input type="text" value="17"/> / <input type="text" value="2008"/>
	City Monticello State IN Zip Code 47960-	Amount of Each Disbursement this Period
	Purpose of Disbursement postage	<input type="text" value="82.00"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	POSTAGE
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Postmaster	Transaction ID: 80522.E7691 Date of Disbursement
	Mailing Address 125 W. Broadway	<input type="text" value="04"/> / <input type="text" value="20"/> / <input type="text" value="2008"/>
	City Monticello State IN Zip Code 47960-	Amount of Each Disbursement this Period
	Purpose of Disbursement postage	<input type="text" value="52.00"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	POSTAGE
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Postmaster	Transaction ID: 80708.E7740 Date of Disbursement
	Mailing Address 125 W. Broadway	<input type="text" value="06"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
	City Monticello State IN Zip Code 47960-	Amount of Each Disbursement this Period
	Purpose of Disbursement postage	<input type="text" value="84.00"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	POSTAGE
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="218.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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)

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

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) Progressive Mailing Address 107 W. Broadway P.O. Box 752 City Monticello State IN Zip Code 47960- Purpose of Disbursement auto insurance 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) ▼	Transaction ID: 80522.E7681 Date of Disbursement 04 / 20 / 2008 Amount of Each Disbursement this Period 340.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 AUTO INSURANCE
B.	Full Name (Last, First, Middle Initial) Q Graphics Mailing Address 108 E. Main St. P.O. Box 180 City Delphi State IN Zip Code 46923- Purpose of Disbursement printing expense 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) ▼	Transaction ID: 80522.E7687 Date of Disbursement 04 / 28 / 2008 Amount of Each Disbursement this Period 2311.20 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PRINTING EXPENSE
C.	Full Name (Last, First, Middle Initial) Doug Raderstorf Mailing Address 200 N. Main St. City Monticello State IN Zip Code 47960- Purpose of Disbursement payroll 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) ▼	Transaction ID: 80522.E7675 Date of Disbursement 04 / 30 / 2008 Amount of Each Disbursement this Period 384.78 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PAYROLL

SUBTOTAL of Disbursements This Page (optional) ▶

3036.48

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)

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

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.

Full Name (Last, First, Middle Initial)
Doug Raderstorf

Transaction ID: 80708.E7734
Date of Disbursement

Mailing Address 200 N. Main St.

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	0	8

City Monticello State IN Zip Code 47960-

Amount of Each Disbursement this Period

384.78

Purpose of Disbursement
payroll

Category/ Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

PAYROLL

State: District:

B.

Full Name (Last, First, Middle Initial)
Doug Raderstorf

Transaction ID: 80710.E7783
Date of Disbursement

Mailing Address 200 N. Main St.

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

City Monticello State IN Zip Code 47960-

Amount of Each Disbursement this Period

384.78

Purpose of Disbursement
payroll

Category/ Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

PAYROLL

State: District:

C.

Full Name (Last, First, Middle Initial)
Super Test Service Stations

Transaction ID: 80522.E7686
Date of Disbursement

Mailing Address 305 W. Broadway Street

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	0		2	0	0	8

City Monticello State IN Zip Code 47960-

Amount of Each Disbursement this Period

253.50

Purpose of Disbursement
gasoline

Category/ Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

GASOLINE

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

1023.06

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

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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)

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

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) Super Test Service Stations <hr/> Mailing Address 305 W. Broadway Street <hr/> City Monticello State IN Zip Code 47960- <hr/> Purpose of Disbursement gasoline Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80626.E7713 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 127.31 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 GASOLINE
B.	Full Name (Last, First, Middle Initial) United Parcel Service <hr/> Mailing Address P.O. Box 85036 <hr/> City Louisville State KY Zip Code 40285-5036 <hr/> Purpose of Disbursement shipping Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80708.E7723 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 113.84 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SHIPPING
C.	Full Name (Last, First, Middle Initial) Verizon Wireless <hr/> Mailing Address P.O. Box 630024 <hr/> City Dallas State TX Zip Code 75263- <hr/> Purpose of Disbursement cell phone expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80522.E7677 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 101.25 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CELL PHONE EXPENSE

SUBTOTAL of Disbursements This Page (optional) ▶

342.40

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)

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

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

<p>A. Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address P.O. Box 630024</p> <p>City Dallas State TX Zip Code 75263-</p> <p>Purpose of Disbursement cell phone expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80522.E7692</p> <p>Date of Disbursement 04 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 176.98</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>CELL PHONE EXPENSE</p>
<p>B. Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address P.O. Box 630024</p> <p>City Dallas State TX Zip Code 75263-</p> <p>Purpose of Disbursement cell phone expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80708.E7725</p> <p>Date of Disbursement 05 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 54.56</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>CELL PHONE EXPENSE</p>
<p>C. Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address P.O. Box 630024</p> <p>City Dallas State TX Zip Code 75263-</p> <p>Purpose of Disbursement cell phone expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80708.E7728</p> <p>Date of Disbursement 05 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 101.93</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>CELL PHONE EXPENSE</p>

SUBTOTAL of Disbursements This Page (optional) ▶

333.47

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)

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

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) Vogel Management <hr/> Mailing Address P.O. Box 987 <hr/> City Monticello State IN Zip Code 47960- <hr/> Purpose of Disbursement May rent Candidate Name Category/Type <hr/> 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) ▼	Transaction ID: 80626.E7702 Date of Disbursement 05 / 16 / 2008 <hr/> Amount of Each Disbursement this Period 250.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 MAY RENT
B.	Full Name (Last, First, Middle Initial) Vogel Management <hr/> Mailing Address P.O. Box 987 <hr/> City Monticello State IN Zip Code 47960- <hr/> Purpose of Disbursement June rent Candidate Name Category/Type <hr/> 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) ▼	Transaction ID: 80708.E7737 Date of Disbursement 06 / 23 / 2008 <hr/> Amount of Each Disbursement this Period 250.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 JUNE RENT
C.	Full Name (Last, First, Middle Initial) Wells Fargo <hr/> Mailing Address 119 North Main Street <hr/> City Monticello State IN Zip Code 47960-6748 <hr/> Purpose of Disbursement fee Candidate Name Category/Type <hr/> 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) ▼	Transaction ID: 80522.E7672 Date of Disbursement 04 / 30 / 2008 <hr/> Amount of Each Disbursement this Period 7.25 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FEE

SUBTOTAL of Disbursements This Page (optional) ▶	507.25
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)

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

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) Wells Fargo Mailing Address 119 North Main Street City Monticello State IN Zip Code 47960-6748 Purpose of Disbursement payroll taxes 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) ▼	Transaction ID: 80626.E7710 Date of Disbursement 05 / 15 / 2008 Amount of Each Disbursement this Period 261.90 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PAYROLL TAXES
B.	Full Name (Last, First, Middle Initial) Wells Fargo Mailing Address 119 North Main Street City Monticello State IN Zip Code 47960-6748 Purpose of Disbursement fee 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) ▼	Transaction ID: 80708.E7776 Date of Disbursement 05 / 31 / 2008 Amount of Each Disbursement this Period 2.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FEE
C.	Full Name (Last, First, Middle Initial) Wells Fargo Mailing Address 119 North Main Street City Monticello State IN Zip Code 47960-6748 Purpose of Disbursement petty cash 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) ▼	Transaction ID: 80708.E7733 Date of Disbursement 06 / 04 / 2008 Amount of Each Disbursement this Period 100.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PETTY CASH

SUBTOTAL of Disbursements This Page (optional) ▶

363.90

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)

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

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) Wells Fargo Mailing Address 119 North Main Street City Monticello State IN Zip Code 47960-6748 Purpose of Disbursement payroll 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) ▼		Transaction ID: 80708.E7739 Date of Disbursement 06 / 16 / 2008 Amount of Each Disbursement this Period 261.90 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PAYROLL
B.	Full Name (Last, First, Middle Initial) White County GOP Mailing Address City Monticello State IN Zip Code 47960- Purpose of Disbursement advertising 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) ▼		Transaction ID: 80708.E7724 Date of Disbursement 05 / 30 / 2008 Amount of Each Disbursement this Period 200.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 ADVERTISING

SUBTOTAL of Disbursements This Page (optional)	▶	461.90
TOTAL This Period (last page this line number only)	▶	46199.15

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 105 / 105
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Corporate Card			Nature of Debt (Purpose): fundraising expense
Mailing Address P.O. Box 10347			
City Des Moines	State IA	ZIP Code 50306-	

Outstanding Balance Beginning This Period		Transaction ID: LS80715.E7786	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
5838.39	0.00	5838.39	

1) SUBTOTALS This Period This Page (optional).....	5838.39
2) TOTALS This Period (last page this line number only).....	5838.39
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	5838.39