



SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Ice Miller PAC

Report Covering the Period: From: 07 / 01 / 2023 To: 12 / 31 / 2023

Table with 2 columns: COLUMN A This Period, COLUMN B Calendar Year-to-Date. Rows include: 6. (a) Cash on Hand January 1, 2023 (57084.39); (b) Cash on Hand at Beginning of Reporting Period (62643.00); (c) Total Receipts (from Line 19) (29058.42 / 50367.03); (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) (91701.42 / 107451.42); 7. Total Disbursements (from Line 31) (30374.76 / 46124.76); 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) (61326.66 / 61326.66); 9. Debts and Obligations Owed TO the Committee (0.00); 10. Debts and Obligations Owed BY the Committee (0.00).

X This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**Ice Miller PAC**

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

<b>I. Receipts</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	27138.14	39207.83
(ii) Unitemized .....	1920.28	11159.20
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	29058.42	50367.03
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	29058.42	50367.03
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	29058.42	50367.03
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	29058.42	50367.03

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	874.76	874.76
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	874.76	874.76
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	29500.00	44750.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. 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 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	500.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	30374.76	46124.76
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	30374.76	46124.76

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	29058.42	50367.03
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	29058.42	50367.03
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	874.76	874.76
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	874.76	874.76

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)	PAGE 6 OF 142
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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

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

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

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.02**

Date of Receipt **07 / 10 / 2023**

**Transaction ID : SA11AI.11383**

Amount of Each Receipt this Period **41.67**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Aaron, Anthony, , ,**

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **291.69**

Date of Receipt **08 / 07 / 2023**

**Transaction ID : SA11AI.11564**

Amount of Each Receipt this Period **41.67**

Memo Item

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

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt **09 / 08 / 2023**

**Transaction ID : SA11AI.11614**

Amount of Each Receipt this Period **41.67**

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>125.01</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 142
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. Aaron, Anthony, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 375.03

Date of Receipt 10 / 06 / 2023  
**Transaction ID : SA11AI.11664**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**B. Aaron, Anthony, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 416.70

Date of Receipt 11 / 07 / 2023  
**Transaction ID : SA11AI.11714**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**C. Aaron, Anthony, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 458.37

Date of Receipt 12 / 07 / 2023  
**Transaction ID : SA11AI.11764**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	125.01
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Aaron, Anthony, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt **12 / 31 / 2023**  
**Transaction ID : SA11AI.11814**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**B. Arcenau, Adam, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt **07 / 10 / 2023**  
**Transaction ID : SA11AI.11384**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

**C. Arcenau, Adam, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 583.38

Date of Receipt **08 / 07 / 2023**  
**Transaction ID : SA11AI.11565**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	208.35
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Arcenau, Adam, , ,</b>		Date of Receipt MM / DD / YYYY 09 / 08 / 2023 <b>Transaction ID : SA11AI.11615</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 83.34
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 666.72	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Arcenau, Adam, , ,</b>		Date of Receipt MM / DD / YYYY 10 / 06 / 2023 <b>Transaction ID : SA11AI.11665</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 83.34
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.06	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Arcenau, Adam, , ,</b>		Date of Receipt MM / DD / YYYY 11 / 07 / 2023 <b>Transaction ID : SA11AI.11715</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 83.34
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 833.40	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.02
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
916.74

Date of Receipt  
12 / 07 / 2023  
Transaction ID : SA11AI.11765

Amount of Each Receipt this Period  
83.34

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Arcenau, Adam, , ,

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.08

Date of Receipt  
12 / 31 / 2023  
Transaction ID : SA11AI.11815

Amount of Each Receipt this Period  
83.34

Memo Item

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

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
208.40

Date of Receipt  
11 / 07 / 2023  
Transaction ID : SA11AI.11716

Amount of Each Receipt this Period  
20.84

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 187.52

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Banta, Holiday, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 07 / 2023 <b>Transaction ID : SA11AI.11766</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 20.84
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 229.24	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Banta, Holiday, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2023 <b>Transaction ID : SA11AI.11816</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 20.84
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.08	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Bell, Diane, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 14 / 2023 <b>Transaction ID : SA11AI.11439</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 75.00
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 975.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	116.68
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Bell, Diane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 07 / 31 / 2023  
**Transaction ID : SA11AI.11452**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

**B. Bell, Diane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1125.00

Date of Receipt 08 / 15 / 2023  
**Transaction ID : SA11AI.11464**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

**C. Bell, Diane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 08 / 31 / 2023  
**Transaction ID : SA11AI.11475**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 225.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Bell, Diane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1275.00**

Date of Receipt **09 / 15 / 2023**  
**Transaction ID : SA11AI.11486**  
 Amount of Each Receipt this Period **75.00**  
 Memo Item

**B. Bell, Diane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1350.00**

Date of Receipt **09 / 29 / 2023**  
**Transaction ID : SA11AI.11496**  
 Amount of Each Receipt this Period **75.00**  
 Memo Item

**C. Bell, Diane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1425.00**

Date of Receipt **10 / 13 / 2023**  
**Transaction ID : SA11AI.11506**  
 Amount of Each Receipt this Period **75.00**  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>225.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Bell, Diane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : SA11AI.11515**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

**B. Bell, Diane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1575.00

Date of Receipt 11 / 15 / 2023  
**Transaction ID : SA11AI.11526**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

**C. Bell, Diane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1650.00

Date of Receipt 11 / 30 / 2023  
**Transaction ID : SA11AI.11537**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 225.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 15 OF 142  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

**A. Bell, Diane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1725.00

Date of Receipt 12 / 15 / 2023  
**Transaction ID : SA11AI.11547**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

**B. Bell, Diane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 12 / 29 / 2023  
**Transaction ID : SA11AI.11557**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

**C. Bittner, Paul, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt 07 / 10 / 2023  
**Transaction ID : SA11AI.11386**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	233.34
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 142
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. Bittner, Paul, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 583.38

Date of Receipt **08 / 07 / 2023**  
**Transaction ID : SA11AI.11567**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

**B. Bittner, Paul, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 666.72

Date of Receipt **09 / 08 / 2023**  
**Transaction ID : SA11AI.11617**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

**C. Bittner, Paul, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 750.06

Date of Receipt **10 / 06 / 2023**  
**Transaction ID : SA11AI.11667**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.02
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Bittner, Paul, L, ,</b>		Date of Receipt MM / DD / YYYY 11 / 07 / 2023 <b>Transaction ID : SA11Al.11717</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 83.34
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 833.40	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Bittner, Paul, L, ,</b>		Date of Receipt MM / DD / YYYY 12 / 07 / 2023 <b>Transaction ID : SA11Al.11767</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 83.34
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 916.74	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Bittner, Paul, L, ,</b>		Date of Receipt MM / DD / YYYY 12 / 31 / 2023 <b>Transaction ID : SA11Al.11817</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 83.34
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1000.08	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.02
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)	PAGE 18 OF 142
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. Borom, Melissa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square  
 Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Sr. Director of Public Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **07 / 14 / 2023**  
**Transaction ID : SA11AI.11442**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Borom, Melissa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square  
 Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Sr. Director of Public Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **07 / 31 / 2023**  
**Transaction ID : SA11AI.11455**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Borom, Melissa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square  
 Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Sr. Director of Public Affairs  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt **08 / 15 / 2023**  
**Transaction ID : SA11AI.11467**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Bouaichi, Kristine, Joy, ,</b>		Date of Receipt MM / DD / YYYY 07 / 10 / 2023 <b>Transaction ID : SA11AI.11387</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 41.67
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.02	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Bouaichi, Kristine, Joy, ,</b>		Date of Receipt MM / DD / YYYY 08 / 07 / 2023 <b>Transaction ID : SA11AI.11568</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 41.67
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 291.69	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Bouaichi, Kristine, Joy, ,</b>		Date of Receipt MM / DD / YYYY 09 / 08 / 2023 <b>Transaction ID : SA11AI.11618</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 41.67
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 333.36	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.01
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 20 OF 142
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Bouaichi, Kristine, Joy, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y <b>10 / 06 / 2023</b>
Mailing Address <b>One American Square Suite 2900</b>		<b>Transaction ID : SA11AI.11668</b>
City <b>Indianapolis</b>	State <b>IN</b>	Zip Code <b>46282</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>41.67</b>
Name of Employer (for Individual) <b>Ice Miller LLP</b>	Occupation (for Individual) <b>Attorney</b>	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>375.03</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Bouaichi, Kristine, Joy, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y <b>11 / 07 / 2023</b>
Mailing Address <b>One American Square Suite 2900</b>		<b>Transaction ID : SA11AI.11718</b>
City <b>Indianapolis</b>	State <b>IN</b>	Zip Code <b>46282</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>41.67</b>
Name of Employer (for Individual) <b>Ice Miller LLP</b>	Occupation (for Individual) <b>Attorney</b>	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>416.70</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Bouaichi, Kristine, Joy, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y <b>12 / 07 / 2023</b>
Mailing Address <b>One American Square Suite 2900</b>		<b>Transaction ID : SA11AI.11768</b>
City <b>Indianapolis</b>	State <b>IN</b>	Zip Code <b>46282</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>41.67</b>
Name of Employer (for Individual) <b>Ice Miller LLP</b>	Occupation (for Individual) <b>Attorney</b>	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <b>458.37</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>125.01</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Bouaichi, Kristine, Joy, ,**

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.04**

Date of Receipt **12 / 31 / 2023**

**Transaction ID : SA11AI.11818**

Amount of Each Receipt this Period **41.67**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Calisoff, Adam, Scott, ,**

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.04**

Date of Receipt **07 / 10 / 2023**

**Transaction ID : SA11AI.11388**

Amount of Each Receipt this Period **83.34**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Calisoff, Adam, Scott, ,**

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼ **583.38**

Date of Receipt **08 / 07 / 2023**

**Transaction ID : SA11AI.11569**

Amount of Each Receipt this Period **83.34**

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>208.35</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 22 OF 142  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Calisoff, Adam, Scott, ,**

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **666.72**

Date of Receipt **09 / 08 / 2023**

**Transaction ID : SA11AI.11619**

Amount of Each Receipt this Period **83.34**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Calisoff, Adam, Scott, ,**

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.06**

Date of Receipt **10 / 06 / 2023**

**Transaction ID : SA11AI.11669**

Amount of Each Receipt this Period **83.34**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Calisoff, Adam, Scott, ,**

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼ **833.40**

Date of Receipt **11 / 07 / 2023**

**Transaction ID : SA11AI.11719**

Amount of Each Receipt this Period **83.34**

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... **250.02**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Calisoff, Adam, Scott, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 916.74

Date of Receipt 12 / 07 / 2023  
**Transaction ID : SA11AI.11769**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

**B. Calisoff, Adam, Scott, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.08

Date of Receipt 12 / 31 / 2023  
**Transaction ID : SA11AI.11819**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

**C. Capen, Timothy, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 208.40

Date of Receipt 11 / 07 / 2023  
**Transaction ID : SA11AI.11720**  
 Amount of Each Receipt this Period 20.84  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	187.52
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

**A. Capen, Timothy, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address **One American Square Suite 2900**  
 City **Indianapolis** State **IN** Zip Code **46282**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) **Ice Miller LLP** Occupation (for Individual) **Attorney**  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **229.24**

Date of Receipt **12 / 07 / 2023**  
**Transaction ID : SA11AI.11770**  
 Amount of Each Receipt this Period **20.84**  
 Memo Item

**B. Capen, Timothy, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address **One American Square Suite 2900**  
 City **Indianapolis** State **IN** Zip Code **46282**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) **Ice Miller LLP** Occupation (for Individual) **Attorney**  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.08**

Date of Receipt **12 / 31 / 2023**  
**Transaction ID : SA11AI.11820**  
 Amount of Each Receipt this Period **20.84**  
 Memo Item

**C. Carr, David, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address **One American Square Suite 2900**  
 City **Indianapolis** State **IN** Zip Code **46282**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) **Ice Miller LLP** Occupation (for Individual) **Attorney**  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **500.04**

Date of Receipt **07 / 10 / 2023**  
**Transaction ID : SA11AI.11390**  
 Amount of Each Receipt this Period **83.34**  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>125.02</b>
<b>TOTAL</b> This Period (last page this line number only).....	



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

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

FOR LINE NUMBER: PAGE 25 OF 142  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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

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

**A. Carr, David, J., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **583.38**

Date of Receipt **08 / 07 / 2023**  
**Transaction ID : SA11AI.11571**

Amount of Each Receipt this Period **83.34**

Memo Item

**B. Carr, David, J., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **666.72**

Date of Receipt **09 / 08 / 2023**  
**Transaction ID : SA11AI.11621**

Amount of Each Receipt this Period **83.34**

Memo Item

**C. Carr, David, J., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼ **750.06**

Date of Receipt **10 / 06 / 2023**  
**Transaction ID : SA11AI.11671**

Amount of Each Receipt this Period **83.34**

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **250.02**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Carr, David, J., ,</b>		Date of Receipt MM / DD / YYYY 11 / 07 / 2023 <b>Transaction ID : SA11AI.11721</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 83.34
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 833.40	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Carr, David, J., ,</b>		Date of Receipt MM / DD / YYYY 12 / 07 / 2023 <b>Transaction ID : SA11AI.11771</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 83.34
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 916.74	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Carr, David, J., ,</b>		Date of Receipt MM / DD / YYYY 12 / 31 / 2023 <b>Transaction ID : SA11AI.11821</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 83.34
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1000.08	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.02
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

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

**A. Christie, Joshua, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.08

Date of Receipt **07 / 10 / 2023**  
**Transaction ID : SA11AI.11391**  
 Amount of Each Receipt this Period 41.68  
 Memo Item

**B. Christie, Joshua, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 291.76

Date of Receipt **08 / 07 / 2023**  
**Transaction ID : SA11AI.11572**  
 Amount of Each Receipt this Period 41.68  
 Memo Item

**C. Christie, Joshua, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.44

Date of Receipt **09 / 08 / 2023**  
**Transaction ID : SA11AI.11622**  
 Amount of Each Receipt this Period 41.68  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	125.04
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 28 OF 142  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
**Ice Miller PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Christie, Joshua, , ,</b>		Date of Receipt MM / DD / YYYY 10 / 06 / 2023 <b>Transaction ID : SA11AI.11672</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 41.68
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.12	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Christie, Joshua, , ,</b>		Date of Receipt MM / DD / YYYY 11 / 07 / 2023 <b>Transaction ID : SA11AI.11722</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 41.68
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 416.80	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Christie, Joshua, , ,</b>		Date of Receipt MM / DD / YYYY 12 / 07 / 2023 <b>Transaction ID : SA11AI.11772</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 41.68
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 458.48	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.04
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

**A. Christie, Joshua, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.16

Date of Receipt 12 / 31 / 2023  
**Transaction ID : SA11AI.11822**  
 Amount of Each Receipt this Period 41.68  
 Memo Item

**B. Cole, Troy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 208.40

Date of Receipt 11 / 07 / 2023  
**Transaction ID : SA11AI.11723**  
 Amount of Each Receipt this Period 20.84  
 Memo Item

**C. Cole, Troy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 229.24

Date of Receipt 12 / 07 / 2023  
**Transaction ID : SA11AI.11773**  
 Amount of Each Receipt this Period 20.84  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	83.36
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

**A. Cole, Troy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.08

Date of Receipt **12 / 31 / 2023**  
**Transaction ID : SA11AI.11823**  
 Amount of Each Receipt this Period 20.84  
 Memo Item

**B. Crist, Brian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt **07 / 10 / 2023**  
**Transaction ID : SA11AI.11393**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

**C. Crist, Brian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 583.38

Date of Receipt **08 / 07 / 2023**  
**Transaction ID : SA11AI.11574**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	187.52
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

**A. Crist, Brian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 666.72

Date of Receipt **09 / 08 / 2023**  
**Transaction ID : SA11AI.11624**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

**B. Crist, Brian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.06

Date of Receipt **10 / 06 / 2023**  
**Transaction ID : SA11AI.11674**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

**C. Crist, Brian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 833.40

Date of Receipt **11 / 07 / 2023**  
**Transaction ID : SA11AI.11724**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.02
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 32 OF 142
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Crist, Brian, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 07 / 2023 <b>Transaction ID : SA11AI.11774</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 83.34
City Indianapolis	State IN Zip Code 46282	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 916.74	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Crist, Brian, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2023 <b>Transaction ID : SA11AI.11824</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 83.34
City Indianapolis	State IN Zip Code 46282	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.08	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Crist, Tyson, A, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2023 <b>Transaction ID : SA11AI.11512</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 10.42
City Indianapolis	State IN Zip Code 46282	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 208.40	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	177.10
<b>TOTAL</b> This Period (last page this line number only).....▶	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Crist, Tyson, A, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 15 / 2023 <b>Transaction ID : SA11AI.11523</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 10.42
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 218.82	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Crist, Tyson, A, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 30 / 2023 <b>Transaction ID : SA11AI.11534</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 10.42
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 229.24	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Crist, Tyson, A, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2023 <b>Transaction ID : SA11AI.11544</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 10.42
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 239.66	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	31.26
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Crist, Tyson, A, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 29 / 2023 <b>Transaction ID : SA11AI.11554</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 10.42
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.08	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Dack, Jeffrey, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 07 / 2023 <b>Transaction ID : SA11AI.11775</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 20.00
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Dack, Jeffrey, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2023 <b>Transaction ID : SA11AI.11825</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 20.00
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 240.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	50.42
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 35 OF 142  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Day, Timothy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 Date of Receipt 07 / 14 / 2023  
 Transaction ID : SA11AI.11441  
 Amount of Each Receipt this Period 100.00  
 Memo Item   
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Principal  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1300.00

**B. Day, Timothy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 Date of Receipt 07 / 31 / 2023  
 Transaction ID : SA11AI.11454  
 Amount of Each Receipt this Period 100.00  
 Memo Item   
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Principal  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1400.00

**C. Day, Timothy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 Date of Receipt 08 / 15 / 2023  
 Transaction ID : SA11AI.11466  
 Amount of Each Receipt this Period 100.00  
 Memo Item   
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Principal  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 300.00  
**TOTAL** This Period (last page this line number only)..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 OF 142  
 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Ice Miller PAC**

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

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

Name of Employer (for Individual) **Ice Miller LLP** Occupation (for Individual) **Principal**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1600.00**

Date of Receipt **08 / 31 / 2023**

**Transaction ID : SA11AI.11477**

Amount of Each Receipt this Period **100.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Day, Timothy, , ,**

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

Name of Employer (for Individual) **Ice Miller LLP** Occupation (for Individual) **Principal**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1700.00**

Date of Receipt **09 / 15 / 2023**

**Transaction ID : SA11AI.11488**

Amount of Each Receipt this Period **100.00**

Memo Item

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

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

Name of Employer (for Individual) **Ice Miller LLP** Occupation (for Individual) **Principal**

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼ **1800.00**

Date of Receipt **09 / 29 / 2023**

**Transaction ID : SA11AI.11498**

Amount of Each Receipt this Period **100.00**

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **300.00**

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

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

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

FOR LINE NUMBER: PAGE 37 OF 142  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis**    State **IN**    Zip Code **46282**

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

Name of Employer (for Individual) **Ice Miller LLP**    Occupation (for Individual) **Principal**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1900.00**

Date of Receipt **10 / 13 / 2023**  
**Transaction ID : SA11AI.11508**

Amount of Each Receipt this Period **100.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Day, Timothy, , ,**

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis**    State **IN**    Zip Code **46282**

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

Name of Employer (for Individual) **Ice Miller LLP**    Occupation (for Individual) **Principal**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2000.00**

Date of Receipt **10 / 31 / 2023**  
**Transaction ID : SA11AI.11517**

Amount of Each Receipt this Period **100.00**

Memo Item

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

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis**    State **IN**    Zip Code **46282**

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

Name of Employer (for Individual) **Ice Miller LLP**    Occupation (for Individual) **Principal**

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼ **2100.00**

Date of Receipt **11 / 15 / 2023**  
**Transaction ID : SA11AI.11528**

Amount of Each Receipt this Period **100.00**

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **300.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 OF 142  
 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Ice Miller PAC**

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

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

Name of Employer (for Individual) **Ice Miller LLP** Occupation (for Individual) **Principal**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2200.00**

Date of Receipt **11 / 30 / 2023**  
**Transaction ID : SA11AI.11539**

Amount of Each Receipt this Period **100.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Day, Timothy, , ,**

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

Name of Employer (for Individual) **Ice Miller LLP** Occupation (for Individual) **Principal**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2300.00**

Date of Receipt **12 / 15 / 2023**  
**Transaction ID : SA11AI.11548**

Amount of Each Receipt this Period **100.00**

Memo Item

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

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

Name of Employer (for Individual) **Ice Miller LLP** Occupation (for Individual) **Principal**

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼ **2400.00**

Date of Receipt **12 / 29 / 2023**  
**Transaction ID : SA11AI.11558**

Amount of Each Receipt this Period **100.00**

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **300.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 39 OF 142
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

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

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **208.40**

Date of Receipt **11 / 07 / 2023**

**Transaction ID : SA11AI.11726**

Amount of Each Receipt this Period **20.84**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. DeLaruelle, Matthew, , ,**

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **229.24**

Date of Receipt **12 / 07 / 2023**

**Transaction ID : SA11AI.11776**

Amount of Each Receipt this Period **20.84**

Memo Item

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

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼ **250.08**

Date of Receipt **12 / 31 / 2023**

**Transaction ID : SA11AI.11826**

Amount of Each Receipt this Period **20.84**

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... **62.52**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Dietrick, Lesa, , ,</b>		Date of Receipt MM / DD / YYYY 07 / 14 / 2023 <b>Transaction ID : SA11AI.11440</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 42.00
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Principal	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 546.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Dietrick, Lesa, , ,</b>		Date of Receipt MM / DD / YYYY 07 / 31 / 2023 <b>Transaction ID : SA11AI.11453</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 42.00
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Principal	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 588.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Dietrick, Lesa, , ,</b>		Date of Receipt MM / DD / YYYY 08 / 15 / 2023 <b>Transaction ID : SA11AI.11465</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 42.00
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Principal	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 630.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	126.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Dietrick, Lesa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Principal  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 672.00

Date of Receipt 08 / 31 / 2023  
**Transaction ID : SA11AI.11476**  
 Amount of Each Receipt this Period 42.00  
 Memo Item

**B. Dietrick, Lesa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Principal  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 714.00

Date of Receipt 09 / 15 / 2023  
**Transaction ID : SA11AI.11487**  
 Amount of Each Receipt this Period 42.00  
 Memo Item

**C. Dietrick, Lesa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Principal  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 756.00

Date of Receipt 09 / 29 / 2023  
**Transaction ID : SA11AI.11497**  
 Amount of Each Receipt this Period 42.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	126.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Dietrick, Lesa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Principal  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 798.00

Date of Receipt 10 / 13 / 2023  
**Transaction ID : SA11AI.11507**  
 Amount of Each Receipt this Period 42.00  
 Memo Item

**B. Dietrick, Lesa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Principal  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 840.00

Date of Receipt 10 / 31 / 2023  
**Transaction ID : SA11AI.11516**  
 Amount of Each Receipt this Period 42.00  
 Memo Item

**C. Dietrick, Lesa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Principal  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 882.00

Date of Receipt 11 / 15 / 2023  
**Transaction ID : SA11AI.11527**  
 Amount of Each Receipt this Period 42.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	126.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Dietrick, Lesa, , ,</b>		Date of Receipt MM / DD / YYYY 11 / 30 / 2023 <b>Transaction ID : SA11AI.11538</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 42.00
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Principal	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 924.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Dimond, Thomas, William, ,</b>		Date of Receipt MM / DD / YYYY 07 / 14 / 2023 <b>Transaction ID : SA11AI.11437</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 20.84
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.92	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Dimond, Thomas, William, ,</b>		Date of Receipt MM / DD / YYYY 07 / 31 / 2023 <b>Transaction ID : SA11AI.11450</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 20.84
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 291.76	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	83.68
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 44 OF 142  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Dimond, Thomas, William, ,**

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis**    State **IN**    Zip Code **46282**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **312.60**

Date of Receipt  
**08 / 15 / 2023**  
**Transaction ID : SA11AI.11462**

Amount of Each Receipt this Period  
**20.84**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Dimond, Thomas, William, ,**

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis**    State **IN**    Zip Code **46282**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.44**

Date of Receipt  
**08 / 31 / 2023**  
**Transaction ID : SA11AI.11473**

Amount of Each Receipt this Period  
**20.84**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Dimond, Thomas, William, ,**

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis**    State **IN**    Zip Code **46282**

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

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

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼ **354.28**

Date of Receipt  
**09 / 15 / 2023**  
**Transaction ID : SA11AI.11484**

Amount of Each Receipt this Period  
**20.84**

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **62.52**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 142		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Dimond, Thomas, William, ,</b>		Date of Receipt MM / DD / YYYY 09 / 29 / 2023 <b>Transaction ID : SA11AI.11494</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 20.84
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.12	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Dimond, Thomas, William, ,</b>		Date of Receipt MM / DD / YYYY 10 / 13 / 2023 <b>Transaction ID : SA11AI.11504</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 20.84
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 395.96	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Dimond, Thomas, William, ,</b>		Date of Receipt MM / DD / YYYY 10 / 31 / 2023 <b>Transaction ID : SA11AI.11513</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 20.84
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 416.80	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	62.52
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Dimond, Thomas, William, ,</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 15 / 2023 <b>Transaction ID : SA11Al.11524</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 20.84
City Indianapolis	State IN Zip Code 46282	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 437.64	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Dimond, Thomas, William, ,</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 30 / 2023 <b>Transaction ID : SA11Al.11535</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 20.84
City Indianapolis	State IN Zip Code 46282	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 458.48	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Dimond, Thomas, William, ,</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 15 / 2023 <b>Transaction ID : SA11Al.11545</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 20.84
City Indianapolis	State IN Zip Code 46282	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 479.32	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	62.52
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Dimond, Thomas, William, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.16

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 29 / 2023  
**Transaction ID : SA11AI.11555**  
 Amount of Each Receipt this Period 20.84  
 Memo Item

**B. Dixon, Aaron, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 10 / 2023  
**Transaction ID : SA11AI.11396**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

**C. Dixon, Aaron, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 583.38

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 07 / 2023  
**Transaction ID : SA11AI.11577**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	187.52
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 48 OF 142  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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

**A. Dixon, Aaron, J., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **666.72**

Date of Receipt **09 / 08 / 2023**  
**Transaction ID : SA11AI.11627**

Amount of Each Receipt this Period **83.34**

Memo Item

**B. Dixon, Aaron, J., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.06**

Date of Receipt **10 / 06 / 2023**  
**Transaction ID : SA11AI.11677**

Amount of Each Receipt this Period **83.34**

Memo Item

**C. Dixon, Aaron, J., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼ **833.40**

Date of Receipt **11 / 07 / 2023**  
**Transaction ID : SA11AI.11727**

Amount of Each Receipt this Period **83.34**

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... **250.02**

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Dixon, Aaron, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 916.74

Date of Receipt  
 12 / 07 / 2023  
**Transaction ID : SA11AI.11777**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

**B. Dixon, Aaron, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.08

Date of Receipt  
 12 / 31 / 2023  
**Transaction ID : SA11AI.11827**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

**C. Dunn, Gregory, James, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt  
 07 / 14 / 2023  
**Transaction ID : SA11AI.11433**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	208.35
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Dunn, Gregory, James, ,</b>		Date of Receipt MM / DD / YYYY 08 / 15 / 2023 <b>Transaction ID : SA11AI.11458</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 41.67
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 291.69	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Dunn, Gregory, James, ,</b>		Date of Receipt MM / DD / YYYY 09 / 15 / 2023 <b>Transaction ID : SA11AI.11480</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 41.67
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.36	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Dunn, Gregory, James, ,</b>		Date of Receipt MM / DD / YYYY 10 / 13 / 2023 <b>Transaction ID : SA11AI.11501</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 41.67
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 375.03	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.01
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 51 OF 142
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Dunn, Gregory, James, ,**

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **416.70**

Date of Receipt **11 / 15 / 2023**

**Transaction ID : SA11AI.11532**

Amount of Each Receipt this Period **41.67**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Dunn, Gregory, James, ,**

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **458.37**

Date of Receipt **12 / 15 / 2023**

**Transaction ID : SA11AI.11552**

Amount of Each Receipt this Period **41.67**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Earnhart, Tamatha, A, ,**

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼ **250.02**

Date of Receipt **07 / 10 / 2023**

**Transaction ID : SA11AI.11397**

Amount of Each Receipt this Period **41.67**

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... **125.01**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Earnhart, Tamatha, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 291.69

Date of Receipt **08 / 07 / 2023**  
**Transaction ID : SA11AI.11578**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**B. Earnhart, Tamatha, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **09 / 08 / 2023**  
**Transaction ID : SA11AI.11628**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**C. Earnhart, Tamatha, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 375.03

Date of Receipt **10 / 06 / 2023**  
**Transaction ID : SA11AI.11678**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.01
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Earnhart, Tamatha, A, ,</b>		Date of Receipt MM / DD / YYYY 11 / 07 / 2023 <b>Transaction ID : SA11AI.11728</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 41.67
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 416.70	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Earnhart, Tamatha, A, ,</b>		Date of Receipt MM / DD / YYYY 12 / 07 / 2023 <b>Transaction ID : SA11AI.11778</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 41.67
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 458.37	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Earnhart, Tamatha, A, ,</b>		Date of Receipt MM / DD / YYYY 12 / 31 / 2023 <b>Transaction ID : SA11AI.11828</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 41.67
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 500.04	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.01
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Fornshell, Matthew, L, ,

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.02

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2023

Transaction ID : SA11AI.11398

Amount of Each Receipt this Period  
41.67

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Fornshell, Matthew, L, ,

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
291.69

Date of Receipt  
MM / DD / YYYY  
08 / 07 / 2023

Transaction ID : SA11AI.11579

Amount of Each Receipt this Period  
41.67

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Fornshell, Matthew, L, ,

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
MM / DD / YYYY  
09 / 08 / 2023

Transaction ID : SA11AI.11629

Amount of Each Receipt this Period  
41.67

Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 125.01

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 55 OF 142
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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

**A. Fornshell, Matthew, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 375.03

Date of Receipt 10 / 06 / 2023  
**Transaction ID : SA11Al.11679**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**B. Fornshell, Matthew, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 416.70

Date of Receipt 11 / 07 / 2023  
**Transaction ID : SA11Al.11729**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**C. Fornshell, Matthew, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 458.37

Date of Receipt 12 / 07 / 2023  
**Transaction ID : SA11Al.11779**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.01
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 56 OF 142
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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

**A. Fornshell, Matthew, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt **12 / 31 / 2023**  
**Transaction ID : SA11AI.11829**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**B. Gasper, George, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 208.40

Date of Receipt **11 / 07 / 2023**  
**Transaction ID : SA11AI.11730**  
 Amount of Each Receipt this Period 20.84  
 Memo Item

**C. Gasper, George, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 229.24

Date of Receipt **12 / 07 / 2023**  
**Transaction ID : SA11AI.11780**  
 Amount of Each Receipt this Period 20.84  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	83.35
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Gasper, George, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2023
Mailing Address One American Square Suite 2900		<b>Transaction ID : SA11AI.11830</b>
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 20.84
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.08	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Glick, Katherine, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 15 / 2023
Mailing Address One American Square Suite 2900		<b>Transaction ID : SA11AI.11529</b>
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Practice Group Director	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Glick, Katherine, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 30 / 2023
Mailing Address One American Square Suite 2900		<b>Transaction ID : SA11AI.11540</b>
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Practice Group Director	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	70.84
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Glick, Katherine, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2023 <b>Transaction ID : SA11AI.11549</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 25.00
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Practice Group Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Glick, Katherine, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 29 / 2023 <b>Transaction ID : SA11AI.11559</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 25.00
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Practice Group Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Heaton, Michael, Joseph, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 15 / 2023 <b>Transaction ID : SA11AI.11490</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 50.00
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Sr. Director of Public Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 OF 142  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Heaton, Michael, Joseph, ,**

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

Name of Employer (for Individual) **Ice Miller LLP** Occupation (for Individual) **Sr. Director of Public Affairs**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **09 / 29 / 2023**  
**Transaction ID : SA11AI.11500**

Amount of Each Receipt this Period **50.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Heaton, Michael, Joseph, ,**

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

Name of Employer (for Individual) **Ice Miller LLP** Occupation (for Individual) **Sr. Director of Public Affairs**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt **10 / 13 / 2023**  
**Transaction ID : SA11AI.11510**

Amount of Each Receipt this Period **50.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Heaton, Michael, Joseph, ,**

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

Name of Employer (for Individual) **Ice Miller LLP** Occupation (for Individual) **Sr. Director of Public Affairs**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **10 / 31 / 2023**  
**Transaction ID : SA11AI.11519**

Amount of Each Receipt this Period **50.00**

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **150.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 60 OF 142  
 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Heaton, Michael, Joseph, ,**

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

Name of Employer (for Individual) **Ice Miller LLP** Occupation (for Individual) **Sr. Director of Public Affairs**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt **11 / 15 / 2023**

**Transaction ID : SA11AI.11530**

Amount of Each Receipt this Period **50.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Heaton, Michael, Joseph, ,**

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

Name of Employer (for Individual) **Ice Miller LLP** Occupation (for Individual) **Sr. Director of Public Affairs**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **11 / 30 / 2023**

**Transaction ID : SA11AI.11541**

Amount of Each Receipt this Period **50.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Heaton, Michael, Joseph, ,**

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

Name of Employer (for Individual) **Ice Miller LLP** Occupation (for Individual) **Sr. Director of Public Affairs**

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼ **550.00**

Date of Receipt **12 / 15 / 2023**

**Transaction ID : SA11AI.11550**

Amount of Each Receipt this Period **50.00**

Memo Item

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

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

**150.00**

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

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

FOR LINE NUMBER: PAGE 61 OF 142  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Heaton, Michael, Joseph, ,**

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis**    State **IN**    Zip Code **46282**

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

Name of Employer (for Individual) **Ice Miller LLP**    Occupation (for Individual) **Sr. Director of Public Affairs**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt  
**12 / 29 / 2023**  
**Transaction ID : SA11AI.11560**

Amount of Each Receipt this Period  
**50.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Herndon, Jane, , ,**

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis**    State **IN**    Zip Code **46282**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.04**

Date of Receipt  
**07 / 10 / 2023**  
**Transaction ID : SA11AI.11400**

Amount of Each Receipt this Period  
**83.34**

Memo Item

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

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis**    State **IN**    Zip Code **46282**

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

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

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼ **583.38**

Date of Receipt  
**08 / 07 / 2023**  
**Transaction ID : SA11AI.11581**

Amount of Each Receipt this Period  
**83.34**

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **216.68**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Herndon, Jane, , ,</b>		Date of Receipt MM / DD / YYYY 09 / 08 / 2023 <b>Transaction ID : SA11AI.11631</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 83.34
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 666.72	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Herndon, Jane, , ,</b>		Date of Receipt MM / DD / YYYY 10 / 06 / 2023 <b>Transaction ID : SA11AI.11681</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 83.34
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.06	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Herndon, Jane, , ,</b>		Date of Receipt MM / DD / YYYY 11 / 07 / 2023 <b>Transaction ID : SA11AI.11731</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 83.34
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 833.40	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.02
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **916.74**

Date of Receipt  
**12 / 07 / 2023**  
**Transaction ID : SA11AI.11781**

Amount of Each Receipt this Period  
**83.34**

Memo Item

**B. Herndon, Jane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.08**

Date of Receipt  
**12 / 31 / 2023**  
**Transaction ID : SA11AI.11831**

Amount of Each Receipt this Period  
**83.34**

Memo Item

**C. Holz, Richard, W, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼ **250.02**

Date of Receipt  
**07 / 10 / 2023**  
**Transaction ID : SA11AI.11401**

Amount of Each Receipt this Period  
**41.67**

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>208.35</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**Holz, Richard, W, ,**

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **291.69**

Date of Receipt **08 / 07 / 2023**

**Transaction ID : SA11AI.11582**

Amount of Each Receipt this Period **41.67**

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**Holz, Richard, W, ,**

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt **09 / 08 / 2023**

**Transaction ID : SA11AI.11632**

Amount of Each Receipt this Period **41.67**

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**Holz, Richard, W, ,**

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼ **375.03**

Date of Receipt **10 / 06 / 2023**

**Transaction ID : SA11AI.11682**

Amount of Each Receipt this Period **41.67**

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>125.01</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 65 OF 142
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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

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

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**Holz, Richard, W, ,**

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **416.70**

Date of Receipt **11 / 07 / 2023**

**Transaction ID : SA11AI.11732**

Amount of Each Receipt this Period **41.67**

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**Holz, Richard, W, ,**

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **458.37**

Date of Receipt **12 / 07 / 2023**

**Transaction ID : SA11AI.11782**

Amount of Each Receipt this Period **41.67**

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**Holz, Richard, W, ,**

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼ **500.04**

Date of Receipt **12 / 31 / 2023**

**Transaction ID : SA11AI.11832**

Amount of Each Receipt this Period **41.67**

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... **125.01**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. John, Thomas, Allen, ,</b>		Date of Receipt MM / DD / YYYY 07 / 10 / 2023 <b>Transaction ID : SA11AI.11402</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 41.67
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.02	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. John, Thomas, Allen, ,</b>		Date of Receipt MM / DD / YYYY 08 / 07 / 2023 <b>Transaction ID : SA11AI.11583</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 41.67
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 291.69	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. John, Thomas, Allen, ,</b>		Date of Receipt MM / DD / YYYY 09 / 08 / 2023 <b>Transaction ID : SA11AI.11633</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 41.67
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 333.36	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.01
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 67 OF 142  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**John, Thomas, Allen, ,**

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.03**

Date of Receipt **10 / 06 / 2023**

**Transaction ID : SA11AI.11683**

Amount of Each Receipt this Period **41.67**

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**John, Thomas, Allen, ,**

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **416.70**

Date of Receipt **11 / 07 / 2023**

**Transaction ID : SA11AI.11733**

Amount of Each Receipt this Period **41.67**

Memo Item

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

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼ **458.37**

Date of Receipt **12 / 07 / 2023**

**Transaction ID : SA11AI.11783**

Amount of Each Receipt this Period **41.67**

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... **125.01**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

**A. John, Thomas, Allen, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.04

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2023

**Transaction ID : SA11AI.11833**

Amount of Each Receipt this Period  
41.67

Memo Item

**B. Jones, Steven, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 15 / 2023

**Transaction ID : SA11AI.11522**

Amount of Each Receipt this Period  
10.00

Memo Item

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

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 30 / 2023

**Transaction ID : SA11AI.11533**

Amount of Each Receipt this Period  
10.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	61.67
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 69 OF 142  
 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

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

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 15 / 2023**

**Transaction ID : SA11AI.11543**

Amount of Each Receipt this Period  
**10.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Jones, Steven, , ,**

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 29 / 2023**

**Transaction ID : SA11AI.11553**

Amount of Each Receipt this Period  
**10.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Kalachnik, Tyler, , Mr.,**

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼ **208.40**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 07 / 2023**

**Transaction ID : SA11AI.11734**

Amount of Each Receipt this Period  
**20.84**

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **40.84**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Kalachnik, Tyler, , Mr.,**

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **229.24**

Date of Receipt **12 / 07 / 2023**

**Transaction ID : SA11AI.11784**

Amount of Each Receipt this Period **20.84**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Kalachnik, Tyler, , Mr.,**

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.08**

Date of Receipt **12 / 31 / 2023**

**Transaction ID : SA11AI.11834**

Amount of Each Receipt this Period **20.84**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Keglwitsch, Josef, , , Jr**

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼ **208.40**

Date of Receipt **11 / 07 / 2023**

**Transaction ID : SA11AI.11735**

Amount of Each Receipt this Period **20.84**

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... **62.52**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Keglwitsch, Josef, , , Jr</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 07 / 2023 <b>Transaction ID : SA11AI.11785</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 20.84
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 229.24	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Keglwitsch, Josef, , , Jr</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2023 <b>Transaction ID : SA11AI.11835</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 20.84
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.08	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Krahulik, Angela, P., ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 07 / 2023 <b>Transaction ID : SA11AI.11736</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 20.84
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 208.40	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	62.52
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Krahulik, Angela, P., ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 07 / 2023 <b>Transaction ID : SA11AI.11786</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 20.84
City Indianapolis	State IN Zip Code 46282	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 229.24	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Krahulik, Angela, P., ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2023 <b>Transaction ID : SA11AI.11836</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 20.84
City Indianapolis	State IN Zip Code 46282	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.08	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Krohne, Steven, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 10 / 2023 <b>Transaction ID : SA11AI.11406</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 83.33
City Indianapolis	State IN Zip Code 46282	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 499.98	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.01
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Krohne, Steven, , ,</b>		Date of Receipt MM / DD / YYYY 08 / 07 / 2023 <b>Transaction ID : SA11AI.11587</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 83.33
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 583.31	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Krohne, Steven, , ,</b>		Date of Receipt MM / DD / YYYY 09 / 08 / 2023 <b>Transaction ID : SA11AI.11637</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 83.33
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 666.64	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Krohne, Steven, , ,</b>		Date of Receipt MM / DD / YYYY 10 / 06 / 2023 <b>Transaction ID : SA11AI.11687</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 83.33
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 749.97	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	249.99
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Krohne, Steven, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 07 / 2023 <b>Transaction ID : SA11AI.11737</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 83.33
City Indianapolis	State IN Zip Code 46282	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 833.30	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Krohne, Steven, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 07 / 2023 <b>Transaction ID : SA11AI.11787</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 83.33
City Indianapolis	State IN Zip Code 46282	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 916.63	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Krohne, Steven, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2023 <b>Transaction ID : SA11AI.11837</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 83.33
City Indianapolis	State IN Zip Code 46282	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 999.96	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	249.99
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Ice Miller PAC**

**A. LeVere, Earl, T, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 208.40

Date of Receipt 11 / 07 / 2023  
**Transaction ID : SA11AI.11738**  
 Amount of Each Receipt this Period 20.84  
 Memo Item

**B. LeVere, Earl, T, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 229.24

Date of Receipt 12 / 07 / 2023  
**Transaction ID : SA11AI.11788**  
 Amount of Each Receipt this Period 20.84  
 Memo Item

**C. LeVere, Earl, T, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.08

Date of Receipt 12 / 31 / 2023  
**Transaction ID : SA11AI.11838**  
 Amount of Each Receipt this Period 20.84  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	62.52
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 76 OF 142
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

**A. Loadholt, Jarrod, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4500.00

Date of Receipt **07 / 10 / 2023**  
**Transaction ID : SA11AI.11408**  
 Amount of Each Receipt this Period 750.00  
 Memo Item

**B. Loadholt, Jarrod, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5250.00

Date of Receipt **08 / 07 / 2023**  
**Transaction ID : SA11AI.11589**  
 Amount of Each Receipt this Period 750.00  
 Memo Item  
**EXCESS TO BE REFUNDED**

**C. Loadholt, Jarrod, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 6000.00

Date of Receipt **09 / 08 / 2023**  
**Transaction ID : SA11AI.11639**  
 Amount of Each Receipt this Period 750.00  
 Memo Item  
**EXCESS TO BE REFUNDED**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Loadholt, Jarrod, , ,</b>		Date of Receipt MM / DD / YYYY 10 / 06 / 2023 <b>Transaction ID : SA11AI.11689</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 750.00
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item <b>EXCESS TO BE REFUNDED</b>
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 6750.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Loadholt, Jarrod, , ,</b>		Date of Receipt MM / DD / YYYY 11 / 07 / 2023 <b>Transaction ID : SA11AI.11739</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 750.00
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item <b>EXCESS TO BE REFUNDED</b>
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Loadholt, Jarrod, , ,</b>		Date of Receipt MM / DD / YYYY 12 / 07 / 2023 <b>Transaction ID : SA11AI.11789</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 750.00
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item <b>EXCESS TO BE REFUNDED</b>
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 8250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2250.00
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Loadholt, Jarrod, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 Date of Receipt: 12 / 31 / 2023  
 Transaction ID : SA11AI.11839  
 Amount of Each Receipt this Period: 750.00  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼: 9000.00  
 Memo Item  
**EXCESS TO BE REFUNDED**

**B. McNeil, Jason, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 Date of Receipt: 07 / 10 / 2023  
 Transaction ID : SA11AI.11409  
 Amount of Each Receipt this Period: 41.66  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼: 249.96  
 Memo Item

**C. McNeil, Jason, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 Date of Receipt: 08 / 07 / 2023  
 Transaction ID : SA11AI.11590  
 Amount of Each Receipt this Period: 41.66  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼: 291.62  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 833.32  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. McNiel, Jason, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.28

Date of Receipt **09 / 08 / 2023**  
**Transaction ID : SA11AI.11640**  
 Amount of Each Receipt this Period 41.66  
 Memo Item

**B. McNiel, Jason, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 374.94

Date of Receipt **10 / 06 / 2023**  
**Transaction ID : SA11AI.11690**  
 Amount of Each Receipt this Period 41.66  
 Memo Item

**C. McNiel, Jason, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 416.60

Date of Receipt **11 / 07 / 2023**  
**Transaction ID : SA11AI.11740**  
 Amount of Each Receipt this Period 41.66  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	124.98
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. McNeil, Jason, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 07 / 2023
Mailing Address One American Square Suite 2900		<b>Transaction ID : SA11AI.11790</b>
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 41.66
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 458.26	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. McNeil, Jason, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2023
Mailing Address One American Square Suite 2900		<b>Transaction ID : SA11AI.11840</b>
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 41.66
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 499.92	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Melliere, Michael, J, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 10 / 2023
Mailing Address One American Square Suite 2900		<b>Transaction ID : SA11AI.11410</b>
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	183.32
<b>TOTAL</b> This Period (last page this line number only).....▶	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Melliere, Michael, J, ,</b>		Date of Receipt MM / DD / YYYY 08 / 07 / 2023 <b>Transaction ID : SA11AI.11591</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 100.00
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Melliere, Michael, J, ,</b>		Date of Receipt MM / DD / YYYY 09 / 08 / 2023 <b>Transaction ID : SA11AI.11641</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 100.00
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Melliere, Michael, J, ,</b>		Date of Receipt MM / DD / YYYY 10 / 06 / 2023 <b>Transaction ID : SA11AI.11691</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 100.00
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 900.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Melliere, Michael, J, ,</b>		Date of Receipt MM / DD / YYYY 11 / 07 / 2023 <b>Transaction ID : SA11AI.11741</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 100.00
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Melliere, Michael, J, ,</b>		Date of Receipt MM / DD / YYYY 12 / 07 / 2023 <b>Transaction ID : SA11AI.11791</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 100.00
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Melliere, Michael, J, ,</b>		Date of Receipt MM / DD / YYYY 12 / 31 / 2023 <b>Transaction ID : SA11AI.11841</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 100.00
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1200.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Ice Miller PAC**

**A. Millikan, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt **07 / 10 / 2023**  
**Transaction ID : SA11Al.11411**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**B. Millikan, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 291.69

Date of Receipt **08 / 07 / 2023**  
**Transaction ID : SA11Al.11592**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**C. Millikan, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **09 / 08 / 2023**  
**Transaction ID : SA11Al.11642**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.01
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 84 OF 142  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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

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

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

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.03**

Date of Receipt **10 / 06 / 2023**  
**Transaction ID : SA11AI.11692**

Amount of Each Receipt this Period **41.67**

Memo Item

**B. Millikan, Michael, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **416.70**

Date of Receipt **11 / 07 / 2023**  
**Transaction ID : SA11AI.11742**

Amount of Each Receipt this Period **41.67**

Memo Item

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

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼ **458.37**

Date of Receipt **12 / 07 / 2023**  
**Transaction ID : SA11AI.11792**

Amount of Each Receipt this Period **41.67**

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **125.01**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Millikan, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt **12 / 31 / 2023**  
**Transaction ID : SA11AI.11842**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**B. Mills, Lawren, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **07 / 10 / 2023**  
**Transaction ID : SA11AI.11412**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Mills, Lawren, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **08 / 07 / 2023**  
**Transaction ID : SA11AI.11593**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	241.67
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Mills, Lawren, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt **09 / 08 / 2023**  
**Transaction ID : SA11AI.11643**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. Mills, Lawren, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt **10 / 06 / 2023**  
**Transaction ID : SA11AI.11693**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Mills, Lawren, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **11 / 07 / 2023**  
**Transaction ID : SA11AI.11743**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 142		
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NAME OF COMMITTEE (In Full)  
**Ice Miller PAC**

**A. Mills, Lawren, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 07 / 2023  
**Transaction ID : SA11AI.11793**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**B. Mills, Lawren, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2023  
**Transaction ID : SA11AI.11843**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C. Miroff, Andrew, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 10 / 2023  
**Transaction ID : SA11AI.11413**  
 Amount of Each Receipt this Period  
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 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	241.67
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Miroff, Andrew, J., ,</b>		Date of Receipt MM / DD / YYYY 08 / 07 / 2023 <b>Transaction ID : SA11AI.11594</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 41.67
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 291.69	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Miroff, Andrew, J., ,</b>		Date of Receipt MM / DD / YYYY 09 / 08 / 2023 <b>Transaction ID : SA11AI.11644</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 41.67
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.36	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Miroff, Andrew, J., ,</b>		Date of Receipt MM / DD / YYYY 10 / 06 / 2023 <b>Transaction ID : SA11AI.11694</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 41.67
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 375.03	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.01
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Miroff, Andrew, J., ,</b>		Date of Receipt MM / DD / YYYY 11 / 07 / 2023 <b>Transaction ID : SA11AI.11744</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 41.67
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 416.70	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Miroff, Andrew, J., ,</b>		Date of Receipt MM / DD / YYYY 12 / 07 / 2023 <b>Transaction ID : SA11AI.11794</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 41.67
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 458.37	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Miroff, Andrew, J., ,</b>		Date of Receipt MM / DD / YYYY 12 / 31 / 2023 <b>Transaction ID : SA11AI.11844</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 41.67
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 500.04	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.01
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 90 OF 142
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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

**A. Oberle, John, H, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt **07 / 10 / 2023**  
**Transaction ID : SA11AI.11414**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**B. Oberle, John, H, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 291.69

Date of Receipt **08 / 07 / 2023**  
**Transaction ID : SA11AI.11595**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**C. Oberle, John, H, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **09 / 08 / 2023**  
**Transaction ID : SA11AI.11645**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.01
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Oberle, John, H, ,</b>		Date of Receipt MM / DD / YYYY 10 / 06 / 2023
Mailing Address One American Square Suite 2900		Transaction ID : SA11AI.11695
City Indianapolis	State IN Zip Code 46282	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 41.67
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.03	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Oberle, John, H, ,</b>		Date of Receipt MM / DD / YYYY 11 / 07 / 2023
Mailing Address One American Square Suite 2900		Transaction ID : SA11AI.11745
City Indianapolis	State IN Zip Code 46282	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 41.67
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 416.70	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Oberle, John, H, ,</b>		Date of Receipt MM / DD / YYYY 12 / 07 / 2023
Mailing Address One American Square Suite 2900		Transaction ID : SA11AI.11795
City Indianapolis	State IN Zip Code 46282	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 41.67
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 458.37	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.01
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Oberle, John, H, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2023  
**Transaction ID : SA11AI.11845**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**B. Ochs, Timothy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 10 / 2023  
**Transaction ID : SA11AI.11415**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**C. Ochs, Timothy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 291.69

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 07 / 2023  
**Transaction ID : SA11AI.11596**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	125.01
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 93 OF 142  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Ochs, Timothy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **09 / 08 / 2023**  
**Transaction ID : SA11AI.11646**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**B. Ochs, Timothy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 375.03

Date of Receipt **10 / 06 / 2023**  
**Transaction ID : SA11AI.11696**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**C. Ochs, Timothy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 416.70

Date of Receipt **11 / 07 / 2023**  
**Transaction ID : SA11AI.11746**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 125.01  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Ochs, Timothy, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 07 / 2023
Mailing Address One American Square Suite 2900		<b>Transaction ID : SA11AI.11796</b>
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 41.67
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 458.37	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Ochs, Timothy, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2023
Mailing Address One American Square Suite 2900		<b>Transaction ID : SA11AI.11846</b>
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 41.67
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.04	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Ouellette, Robert, R, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 10 / 2023
Mailing Address One American Square Suite 2900		<b>Transaction ID : SA11AI.11416</b>
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 83.34
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 500.04	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	166.68
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Ouellette, Robert, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **583.38**

Date of Receipt **08 / 07 / 2023**  
**Transaction ID : SA11AI.11597**  
 Amount of Each Receipt this Period **83.34**  
 Memo Item

**B. Ouellette, Robert, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **666.72**

Date of Receipt **09 / 08 / 2023**  
**Transaction ID : SA11AI.11647**  
 Amount of Each Receipt this Period **83.34**  
 Memo Item

**C. Ouellette, Robert, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **750.06**

Date of Receipt **10 / 06 / 2023**  
**Transaction ID : SA11AI.11697**  
 Amount of Each Receipt this Period **83.34**  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>250.02</b>
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 96 OF 142
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
	<input type="checkbox"/> 16
	<input type="checkbox"/> 17

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

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

**A. Ouellette, Robert, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.40

Date of Receipt 11 / 07 / 2023  
**Transaction ID : SA11AI.11747**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

**B. Ouellette, Robert, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 916.74

Date of Receipt 12 / 07 / 2023  
**Transaction ID : SA11AI.11797**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

**C. Ouellette, Robert, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.08

Date of Receipt 12 / 31 / 2023  
**Transaction ID : SA11AI.11847**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.02
<b>TOTAL</b> This Period (last page this line number only).....	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Pampush, Thomas, A, ,</b>		Date of Receipt MM / DD / YYYY <b>11 / 07 / 2023</b>
Mailing Address <b>One American Square Suite 2900</b>		<b>Transaction ID : SA11AI.11748</b>
City <b>Indianapolis</b>	State <b>IN</b>	Zip Code <b>46282</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>20.84</b>
Name of Employer (for Individual) <b>Ice Miller LLP</b>	Occupation (for Individual) <b>Attorney</b>	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>208.40</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Pampush, Thomas, A, ,</b>		Date of Receipt MM / DD / YYYY <b>12 / 07 / 2023</b>
Mailing Address <b>One American Square Suite 2900</b>		<b>Transaction ID : SA11AI.11798</b>
City <b>Indianapolis</b>	State <b>IN</b>	Zip Code <b>46282</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>20.84</b>
Name of Employer (for Individual) <b>Ice Miller LLP</b>	Occupation (for Individual) <b>Attorney</b>	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>229.24</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Pampush, Thomas, A, ,</b>		Date of Receipt MM / DD / YYYY <b>12 / 31 / 2023</b>
Mailing Address <b>One American Square Suite 2900</b>		<b>Transaction ID : SA11AI.11848</b>
City <b>Indianapolis</b>	State <b>IN</b>	Zip Code <b>46282</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>20.84</b>
Name of Employer (for Individual) <b>Ice Miller LLP</b>	Occupation (for Individual) <b>Attorney</b>	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <b>250.08</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>62.52</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Pashos, Kay, , ,</b>		Date of Receipt MM / DD / YYYY 07 / 14 / 2023 <b>Transaction ID : SA11AI.11436</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 20.83
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.79	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Pashos, Kay, , ,</b>		Date of Receipt MM / DD / YYYY 07 / 31 / 2023 <b>Transaction ID : SA11AI.11449</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 20.83
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 291.62	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Pashos, Kay, , ,</b>		Date of Receipt MM / DD / YYYY 08 / 15 / 2023 <b>Transaction ID : SA11AI.11461</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 20.83
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 312.45	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	62.49
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Pashos, Kay, , ,</b>		Date of Receipt MM / DD / YYYY 08 / 31 / 2023 <b>Transaction ID : SA11AI.11472</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 20.83
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.28	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Pashos, Kay, , ,</b>		Date of Receipt MM / DD / YYYY 09 / 15 / 2023 <b>Transaction ID : SA11AI.11483</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 20.83
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 354.11	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Pashos, Kay, , ,</b>		Date of Receipt MM / DD / YYYY 09 / 29 / 2023 <b>Transaction ID : SA11AI.11493</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 20.83
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 374.94	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	62.49
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 100 OF 142  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Poor, Ryan, McCabe, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt **07 / 10 / 2023**  
**Transaction ID : SA11AI.11418**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**B. Poor, Ryan, McCabe, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 291.69

Date of Receipt **08 / 07 / 2023**  
**Transaction ID : SA11AI.11599**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**C. Poor, Ryan, McCabe, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **09 / 08 / 2023**  
**Transaction ID : SA11AI.11649**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 125.01  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Poor, Ryan, McCabe, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 375.03

Date of Receipt 10 / 06 / 2023  
**Transaction ID : SA11AI.11699**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**B. Poor, Ryan, McCabe, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 416.70

Date of Receipt 11 / 07 / 2023  
**Transaction ID : SA11AI.11749**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**C. Poor, Ryan, McCabe, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 458.37

Date of Receipt 12 / 07 / 2023  
**Transaction ID : SA11AI.11799**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.01
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Poor, Ryan, McCabe, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt **12 / 31 / 2023**  
**Transaction ID : SA11AI.11849**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**B. Richards, Mark, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt **07 / 10 / 2023**  
**Transaction ID : SA11AI.11419**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

**C. Richards, Mark, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 583.38

Date of Receipt **08 / 07 / 2023**  
**Transaction ID : SA11AI.11600**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	208.35
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Richards, Mark, , ,</b>		Date of Receipt MM / DD / YYYY 09 / 08 / 2023 <b>Transaction ID : SA11AI.11650</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 83.34
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 666.72	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Richards, Mark, , ,</b>		Date of Receipt MM / DD / YYYY 10 / 06 / 2023 <b>Transaction ID : SA11AI.11700</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 83.34
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.06	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Richards, Mark, , ,</b>		Date of Receipt MM / DD / YYYY 11 / 07 / 2023 <b>Transaction ID : SA11AI.11750</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 83.34
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 833.40	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.02
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

**A. Richards, Mark, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 916.74

Date of Receipt 12 / 07 / 2023  
**Transaction ID : SA11AI.11800**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

**B. Richards, Mark, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.08

Date of Receipt 12 / 31 / 2023  
**Transaction ID : SA11AI.11850**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

**C. Sciscoe, Tara, Schulstad, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt 07 / 10 / 2023  
**Transaction ID : SA11AI.11420**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	208.35
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Sciscoe, Tara, Schulstad, ,</b>		Date of Receipt MM / DD / YYYY 08 / 07 / 2023 <b>Transaction ID : SA11AI.11601</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 41.67
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 291.69	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Sciscoe, Tara, Schulstad, ,</b>		Date of Receipt MM / DD / YYYY 09 / 08 / 2023 <b>Transaction ID : SA11AI.11651</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 41.67
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.36	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Sciscoe, Tara, Schulstad, ,</b>		Date of Receipt MM / DD / YYYY 10 / 06 / 2023 <b>Transaction ID : SA11AI.11701</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 41.67
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 375.03	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.01
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 142		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Sciscoe, Tara, Schulstad, ,</b>		Date of Receipt MM / DD / YYYY <b>11 / 07 / 2023</b>
Mailing Address <b>One American Square Suite 2900</b>		<b>Transaction ID : SA11AI.11751</b>
City <b>Indianapolis</b>	State <b>IN</b>	Zip Code <b>46282</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>41.67</b>
Name of Employer (for Individual) <b>Ice Miller LLP</b>	Occupation (for Individual) <b>Attorney</b>	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>416.70</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Sciscoe, Tara, Schulstad, ,</b>		Date of Receipt MM / DD / YYYY <b>12 / 07 / 2023</b>
Mailing Address <b>One American Square Suite 2900</b>		<b>Transaction ID : SA11AI.11801</b>
City <b>Indianapolis</b>	State <b>IN</b>	Zip Code <b>46282</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>41.67</b>
Name of Employer (for Individual) <b>Ice Miller LLP</b>	Occupation (for Individual) <b>Attorney</b>	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>458.37</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Sciscoe, Tara, Schulstad, ,</b>		Date of Receipt MM / DD / YYYY <b>12 / 31 / 2023</b>
Mailing Address <b>One American Square Suite 2900</b>		<b>Transaction ID : SA11AI.11851</b>
City <b>Indianapolis</b>	State <b>IN</b>	Zip Code <b>46282</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>41.67</b>
Name of Employer (for Individual) <b>Ice Miller LLP</b>	Occupation (for Individual) <b>Attorney</b>	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <b>500.04</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>125.01</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Seamands, Rebecca, Jane, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt **07 / 10 / 2023**  
**Transaction ID : SA11AI.11421**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

**B. Seamands, Rebecca, Jane, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 583.38

Date of Receipt **08 / 07 / 2023**  
**Transaction ID : SA11AI.11602**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

**C. Seamands, Rebecca, Jane, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 666.72

Date of Receipt **09 / 08 / 2023**  
**Transaction ID : SA11AI.11652**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.02
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Seamands, Rebecca, Jane, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.06

Date of Receipt **10 / 06 / 2023**  
**Transaction ID : SA11AI.11702**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

**B. Seamands, Rebecca, Jane, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.40

Date of Receipt **11 / 07 / 2023**  
**Transaction ID : SA11AI.11752**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

**C. Seamands, Rebecca, Jane, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 916.74

Date of Receipt **12 / 07 / 2023**  
**Transaction ID : SA11AI.11802**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.02
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Seamands, Rebecca, Jane, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2023 <b>Transaction ID : SA11AI.11852</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 83.34
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.08	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Sears, Christopher, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 10 / 2023 <b>Transaction ID : SA11AI.11422</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 41.67
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.02	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Sears, Christopher, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 08 / 07 / 2023 <b>Transaction ID : SA11AI.11603</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 41.67
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 291.69	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	166.68
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Sears, Christopher, , ,</b>		Date of Receipt MM / DD / YYYY 09 / 08 / 2023 <b>Transaction ID : SA11AI.11653</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 41.67
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.36	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Sears, Christopher, , ,</b>		Date of Receipt MM / DD / YYYY 10 / 06 / 2023 <b>Transaction ID : SA11AI.11703</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 41.67
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.03	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Sears, Christopher, , ,</b>		Date of Receipt MM / DD / YYYY 11 / 07 / 2023 <b>Transaction ID : SA11AI.11753</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 41.67
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 416.70	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.01
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 111 OF 142  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A. Sears, Christopher, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address **One American Square Suite 2900**  
 City **Indianapolis** State **IN** Zip Code **46282**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) **Ice Miller LLP** Occupation (for Individual) **Attorney**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **458.37**

Date of Receipt **12 / 07 / 2023**  
**Transaction ID : SA11AI.11803**  
 Amount of Each Receipt this Period **41.67**  
 Memo Item

**B. Sears, Christopher, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address **One American Square Suite 2900**  
 City **Indianapolis** State **IN** Zip Code **46282**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) **Ice Miller LLP** Occupation (for Individual) **Attorney**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **500.04**

Date of Receipt **12 / 31 / 2023**  
**Transaction ID : SA11AI.11853**  
 Amount of Each Receipt this Period **41.67**  
 Memo Item

**C. Selby, Myra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address **One American Square Suite 2900**  
 City **Indianapolis** State **IN** Zip Code **46282**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) **Ice Miller LLP** Occupation (for Individual) **Attorney**  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ **208.40**

Date of Receipt **11 / 07 / 2023**  
**Transaction ID : SA11AI.11754**  
 Amount of Each Receipt this Period **20.84**  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... **104.18**  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Selby, Myra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 229.24

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 07 / 2023  
**Transaction ID : SA11AI.11804**  
 Amount of Each Receipt this Period  
 20.84  
 Memo Item

**B. Selby, Myra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.08

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2023  
**Transaction ID : SA11AI.11854**  
 Amount of Each Receipt this Period  
 20.84  
 Memo Item

**C. Singer, Eric, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 208.40

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 07 / 2023  
**Transaction ID : SA11AI.11755**  
 Amount of Each Receipt this Period  
 20.84  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	62.52
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Singer, Eric, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address **One American Square Suite 2900**  
 City **Indianapolis** State **IN** Zip Code **46282**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) **Ice Miller LLP** Occupation (for Individual) **Attorney**  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **229.24**

Date of Receipt **12 / 07 / 2023**  
**Transaction ID : SA11AI.11805**  
 Amount of Each Receipt this Period **20.84**  
 Memo Item

**B. Singer, Eric, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address **One American Square Suite 2900**  
 City **Indianapolis** State **IN** Zip Code **46282**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) **Ice Miller LLP** Occupation (for Individual) **Attorney**  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.08**

Date of Receipt **12 / 31 / 2023**  
**Transaction ID : SA11AI.11855**  
 Amount of Each Receipt this Period **20.84**  
 Memo Item

**C. Smikle, Richard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address **One American Square Suite 2900**  
 City **Indianapolis** State **IN** Zip Code **46282**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) **Ice Miller LLP** Occupation (for Individual) **Attorney**  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **600.00**

Date of Receipt **07 / 10 / 2023**  
**Transaction ID : SA11AI.11425**  
 Amount of Each Receipt this Period **100.00**  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>141.68</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 114 OF 142  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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

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

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt **08 / 07 / 2023**  
**Transaction ID : SA11AI.11606**

Amount of Each Receipt this Period **100.00**

Memo Item

**B. Smikle, Richard, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt **09 / 08 / 2023**  
**Transaction ID : SA11AI.11656**

Amount of Each Receipt this Period **100.00**

Memo Item

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

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt **10 / 06 / 2023**  
**Transaction ID : SA11AI.11706**

Amount of Each Receipt this Period **100.00**

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **300.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Smikle, Richard, , ,</b>		Date of Receipt MM / DD / YYYY 11 / 07 / 2023 <b>Transaction ID : SA11AI.11756</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 100.00
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Smikle, Richard, , ,</b>		Date of Receipt MM / DD / YYYY 12 / 07 / 2023 <b>Transaction ID : SA11AI.11806</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 100.00
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Smikle, Richard, , ,</b>		Date of Receipt MM / DD / YYYY 12 / 31 / 2023 <b>Transaction ID : SA11AI.11856</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 100.00
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1200.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 OF 142
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NAME OF COMMITTEE (In Full)  
**Ice Miller PAC**

**A. Snively, Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.04

Date of Receipt **12 / 31 / 2023**  
**Transaction ID : SA11AI.11857**  
 Amount of Each Receipt this Period 16.67  
 Memo Item

**B. Snyder, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt **07 / 10 / 2023**  
**Transaction ID : SA11AI.11427**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

**C. Snyder, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 583.38

Date of Receipt **08 / 07 / 2023**  
**Transaction ID : SA11AI.11608**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	183.35
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
666.72

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 08 / 2023

**Transaction ID : SA11AI.11658**

Amount of Each Receipt this Period  
83.34

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Snyder, James, , ,

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.06

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 06 / 2023

**Transaction ID : SA11AI.11708**

Amount of Each Receipt this Period  
83.34

Memo Item

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

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
833.40

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 07 / 2023

**Transaction ID : SA11AI.11758**

Amount of Each Receipt this Period  
83.34

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.02
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **916.74**

Date of Receipt  
**12 / 07 / 2023**  
**Transaction ID : SA11AI.11808**

Amount of Each Receipt this Period  
**83.34**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Snyder, James, , ,**

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.08**

Date of Receipt  
**12 / 31 / 2023**  
**Transaction ID : SA11AI.11858**

Amount of Each Receipt this Period  
**83.34**

Memo Item

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

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼ **500.04**

Date of Receipt  
**07 / 10 / 2023**  
**Transaction ID : SA11AI.11428**

Amount of Each Receipt this Period  
**83.34**

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>250.02</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Stackhouse, Dale, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 583.38

Date of Receipt 08 / 07 / 2023  
**Transaction ID : SA11AI.11609**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

**B. Stackhouse, Dale, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 666.72

Date of Receipt 09 / 08 / 2023  
**Transaction ID : SA11AI.11659**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

**C. Stackhouse, Dale, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 750.06

Date of Receipt 10 / 06 / 2023  
**Transaction ID : SA11AI.11709**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.02
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 120 OF 142
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. Stackhouse, Dale, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.40

Date of Receipt  
 11 / 07 / 2023  
**Transaction ID : SA11AI.11759**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

**B. Stackhouse, Dale, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 916.74

Date of Receipt  
 12 / 07 / 2023  
**Transaction ID : SA11AI.11809**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

**C. Stackhouse, Dale, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.08

Date of Receipt  
 12 / 31 / 2023  
**Transaction ID : SA11AI.11859**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.02
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Stroud, Dennis, Michael, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 15 / 2023 <b>Transaction ID : SA11AI.11531</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 142.00
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 284.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Stroud, Dennis, Michael, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 30 / 2023 <b>Transaction ID : SA11AI.11542</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 142.00
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 426.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Stroud, Dennis, Michael, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2023 <b>Transaction ID : SA11AI.11551</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 142.00
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 568.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	426.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 122 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Ice Miller PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Stroud, Dennis, Michael, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 29 / 2023 <b>Transaction ID : SA11AI.11561</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 142.00
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 710.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Tait, Sara, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 14 / 2023 <b>Transaction ID : SA11AI.11438</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 50.00
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Tait, Sara, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 31 / 2023 <b>Transaction ID : SA11AI.11451</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 50.00
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 700.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	242.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 123 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Tait, Sara, , ,</b>		Date of Receipt MM / DD / YYYY 08 / 15 / 2023 <b>Transaction ID : SA11AI.11463</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 50.00
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Tait, Sara, , ,</b>		Date of Receipt MM / DD / YYYY 08 / 31 / 2023 <b>Transaction ID : SA11AI.11474</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 50.00
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Tait, Sara, , ,</b>		Date of Receipt MM / DD / YYYY 09 / 15 / 2023 <b>Transaction ID : SA11AI.11485</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 50.00
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 850.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Tait, Sara, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 29 / 2023  
**Transaction ID : SA11AI.11495**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**B. Tait, Sara, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 13 / 2023  
**Transaction ID : SA11AI.11505**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**C. Tait, Sara, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2023  
**Transaction ID : SA11AI.11514**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 OF 142		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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

**A. Tait, Sara, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 11 / 15 / 2023  
**Transaction ID : SA11AI.11525**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Tait, Sara, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 11 / 30 / 2023  
**Transaction ID : SA11AI.11536**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Tait, Sara, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 12 / 15 / 2023  
**Transaction ID : SA11AI.11546**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Tait, Sara, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **12 / 29 / 2023**  
**Transaction ID : SA11AI.11556**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Thornburgh, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt **07 / 10 / 2023**  
**Transaction ID : SA11AI.11429**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

**C. Thornburgh, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 583.38

Date of Receipt **08 / 07 / 2023**  
**Transaction ID : SA11AI.11610**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	216.68
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 127 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Thornburgh, John, , ,</b>		Date of Receipt MM / DD / YYYY 09 / 08 / 2023 <b>Transaction ID : SA11AI.11660</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 83.34
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 666.72	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Thornburgh, John, , ,</b>		Date of Receipt MM / DD / YYYY 10 / 06 / 2023 <b>Transaction ID : SA11AI.11710</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 83.34
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.06	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Thornburgh, John, , ,</b>		Date of Receipt MM / DD / YYYY 11 / 07 / 2023 <b>Transaction ID : SA11AI.11760</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 83.34
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 833.40	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.02
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **916.74**

Date of Receipt **12 / 07 / 2023**

**Transaction ID : SA11AI.11810**

Amount of Each Receipt this Period **83.34**

Memo Item

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

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.08**

Date of Receipt **12 / 31 / 2023**

**Transaction ID : SA11AI.11860**

Amount of Each Receipt this Period **83.34**

Memo Item

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

Mailing Address **One American Square  
Suite 2900**

City **Indianapolis** State **IN** Zip Code **46282**

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼ **500.04**

Date of Receipt **07 / 10 / 2023**

**Transaction ID : SA11AI.11430**

Amount of Each Receipt this Period **83.34**

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... **250.02**

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 129 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Thrapp, Richard, , ,</b>		Date of Receipt MM / DD / YYYY 08 / 07 / 2023
Mailing Address One American Square Suite 2900		Transaction ID : SA11AI.11611
City Indianapolis	State IN Zip Code 46282	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 83.34
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 583.38	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Thrapp, Richard, , ,</b>		Date of Receipt MM / DD / YYYY 09 / 08 / 2023
Mailing Address One American Square Suite 2900		Transaction ID : SA11AI.11661
City Indianapolis	State IN Zip Code 46282	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 83.34
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 666.72	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Thrapp, Richard, , ,</b>		Date of Receipt MM / DD / YYYY 10 / 06 / 2023
Mailing Address One American Square Suite 2900		Transaction ID : SA11AI.11711
City Indianapolis	State IN Zip Code 46282	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 83.34
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 750.06	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.02
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 130 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Thrapp, Richard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.40

Date of Receipt 11 / 07 / 2023  
**Transaction ID : SA11AI.11761**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

**B. Thrapp, Richard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 916.74

Date of Receipt 12 / 07 / 2023  
**Transaction ID : SA11AI.11811**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

**C. Thrapp, Richard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.08

Date of Receipt 12 / 31 / 2023  
**Transaction ID : SA11AI.11861**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.02
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 131 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Tooley, Michael, , ,</b>		Date of Receipt MM / DD / YYYY 07 / 10 / 2023 <b>Transaction ID : SA11AI.11431</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 83.34
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.04	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Tooley, Michael, , ,</b>		Date of Receipt MM / DD / YYYY 08 / 07 / 2023 <b>Transaction ID : SA11AI.11612</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 83.34
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 583.38	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Tooley, Michael, , ,</b>		Date of Receipt MM / DD / YYYY 09 / 08 / 2023 <b>Transaction ID : SA11AI.11662</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 83.34
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 666.72	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.02
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 132 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Tooley, Michael, , ,</b>		Date of Receipt MM / DD / YYYY 10 / 06 / 2023
Mailing Address One American Square Suite 2900		Transaction ID : SA11AI.11712
City Indianapolis	State IN Zip Code 46282	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 83.34
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.06	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Tooley, Michael, , ,</b>		Date of Receipt MM / DD / YYYY 11 / 07 / 2023
Mailing Address One American Square Suite 2900		Transaction ID : SA11AI.11762
City Indianapolis	State IN Zip Code 46282	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 83.34
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 833.40	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Tooley, Michael, , ,</b>		Date of Receipt MM / DD / YYYY 12 / 07 / 2023
Mailing Address One American Square Suite 2900		Transaction ID : SA11AI.11812
City Indianapolis	State IN Zip Code 46282	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 83.34
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 916.74	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.02
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 133 OF 142
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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

**A. Tooley, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address **One American Square Suite 2900**  
 City **Indianapolis** State **IN** Zip Code **46282**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) **Ice Miller LLP** Occupation (for Individual) **Attorney**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **1000.08**

Date of Receipt **12 / 31 / 2023**  
**Transaction ID : SA11AI.11862**  
 Amount of Each Receipt this Period **83.34**  
 Memo Item

**B. Williams, Lisa, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address **One American Square Suite 2900**  
 City **Indianapolis** State **IN** Zip Code **46282**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) **Ice Miller LLP** Occupation (for Individual) **Attorney**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **250.02**

Date of Receipt **07 / 10 / 2023**  
**Transaction ID : SA11AI.11432**  
 Amount of Each Receipt this Period **41.67**  
 Memo Item

**C. Williams, Lisa, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address **One American Square Suite 2900**  
 City **Indianapolis** State **IN** Zip Code **46282**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) **Ice Miller LLP** Occupation (for Individual) **Attorney**  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ **291.69**

Date of Receipt **08 / 07 / 2023**  
**Transaction ID : SA11AI.11613**  
 Amount of Each Receipt this Period **41.67**  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>166.68</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 134 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Williams, Lisa, A, ,</b>		Date of Receipt MM / DD / YYYY 09 / 08 / 2023 <b>Transaction ID : SA11AI.11663</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 41.67
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.36	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Williams, Lisa, A, ,</b>		Date of Receipt MM / DD / YYYY 10 / 06 / 2023 <b>Transaction ID : SA11AI.11713</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 41.67
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.03	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Williams, Lisa, A, ,</b>		Date of Receipt MM / DD / YYYY 11 / 07 / 2023 <b>Transaction ID : SA11AI.11763</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 41.67
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 416.70	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.01
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 135 OF 142
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Williams, Lisa, A, ,</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 07 / 2023 <b>Transaction ID : SA11AI.11813</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 41.67
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 458.37	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Williams, Lisa, A, ,</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2023 <b>Transaction ID : SA11AI.11863</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 41.67
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.04	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C.</b>		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City	State	Zip Code
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual)	Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	83.34
<b>TOTAL</b> This Period (last page this line number only).....▶	27138.14





SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

Grid for line numbers 21b-30b with checkboxes, where 23 is checked.

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NAME OF COMMITTEE (In Full)
Ice Miller PAC

Form A: BALDERSON FOR CONGRESS. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form B: BANKS FOR SENATE. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form C: BEATTY FOR CONGRESS. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

SUBTOTAL of Disbursements This Page (optional) 4500.00
TOTAL This Period (last page this line number only)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) <b>A. BUCSHON FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 07 / 14 / 2023
Mailing Address PO BOX 250		FEC Identification Number <b>C</b> C00468256 <b>Transaction ID : SB23.11869</b> Amount of Each Disbursement this Period 1000.00
City NEWBURGH	State IN	
Purpose of Disbursement FEDERAL CONTRIBUTION		Category/ Type
Candidate Name BUCSHON, LARRY D, ,		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>
State: IN	District: 08	

Full Name (Last, First, Middle Initial) <b>B. CAREY FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 07 / 26 / 2023
Mailing Address PO BOX 190		FEC Identification Number <b>C</b> C00671271 <b>Transaction ID : SB23.11875</b> Amount of Each Disbursement this Period 1500.00
City FAIRFAX STATION	State VA	
Purpose of Disbursement FEDERAL CONTRIBUTION		Category/ Type
Candidate Name CAREY, MIKE, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Memo Item <input type="checkbox"/>
State: OH	District: 15	

Full Name (Last, First, Middle Initial) <b>C. CITIZENS FOR TURNER</b>		Date of Disbursement MM / DD / YYYY 12 / 04 / 2023
Mailing Address 120 W 2ND STREET SUITE 1510		FEC Identification Number <b>C</b> C00373001 <b>Transaction ID : SB23.11889</b> Amount of Each Disbursement this Period 2000.00
City DAYTON	State OH	
Purpose of Disbursement FEDERAL CONTRIBUTION		Category/ Type
Candidate Name TURNER, MICHAEL R, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>
State: OH	District: 10	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) <b>A. CLARKE FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 11 / 13 / 2023
Mailing Address PO BOX 250200		FEC Identification Number C 000415331 <b>Transaction ID : SB23.11887</b>
City BROOKLYN	State NY	Zip Code 11225
Purpose of Disbursement FEDERAL CONTRIBUTION		Amount of Each Disbursement this Period 2500.00
Candidate Name CLARKE, YVETTE D., ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY	District: 09	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. DCCC</b>		Date of Disbursement MM / DD / YYYY 08 / 10 / 2023
Mailing Address 430 SOUTH CAPITOL STREET, SE 2ND FLOOR		FEC Identification Number C 00000935 <b>Transaction ID : SB23.11879</b>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement FEDERAL CONTRIBUTION		Amount of Each Disbursement this Period 1000.00
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. EMILIA SYKES FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 07 / 13 / 2023
Mailing Address P.O. BOX 1347		FEC Identification Number C 00801274 <b>Transaction ID : SB23.11865</b>
City AKRON	State OH	Zip Code 44309
Purpose of Disbursement FEDERAL CONTRIBUTION		Amount of Each Disbursement this Period 2500.00
Candidate Name SYKES, EMILIA, , ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH	District: 13	<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A. **FRIENDS OF DAVE JOYCE**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 9856 ARCHER LN

M M M	/	D D D	/	Y Y Y Y Y
09		28		2023

City  
DUBLIN

State  
OH

Zip Code  
43017

FEC Identification Number

Purpose of Disbursement  
FEDERAL CONTRIBUTION

**C** C00527457

Candidate Name  
JOYCE, DAVID P, , ,

Category/  
Type

**Transaction ID : SB23.11884**

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President  
State: OH District: 14

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

3000.00

Memo Item

B. **GREG PENCE FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 275

M M M	/	D D D	/	Y Y Y Y Y
07		14		2023

City  
TAYLORSVILLE

State  
IN

Zip Code  
47280

FEC Identification Number

Purpose of Disbursement  
FEDERAL CONTRIBUTION

**C** C00658401

Candidate Name  
PENCE, GREGORY J, , ,

Category/  
Type

**Transaction ID : SB23.11867**

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President  
State: IN District: 06

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

1500.00

Memo Item

C. **HOUCHIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 234

M M M	/	D D D	/	Y Y Y Y Y
10		19		2023

City  
SALEM

State  
IN

Zip Code  
47167

FEC Identification Number

Purpose of Disbursement  
FEDERAL CONTRIBUTION

**C** C00800649

Candidate Name  
HOUCHIN, ERIN, , ,

Category/  
Type

**Transaction ID : SB23.11886**

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President  
State: IN District: 09

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

1000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

5500.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Ice Miller PAC

Full Name (Last, First, Middle Initial)

### A. JOHNSON FOR CONGRESS

Mailing Address PO BOX 906

City  
MARIETTA

State  
OH

Zip Code  
45750

Purpose of Disbursement  
FEDERAL CONTRIBUTION

Candidate Name

JOHNSON, BILL, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: OH District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	6		2	0	2	3

FEC Identification Number

C00476820

Transaction ID : SB23.11873

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

### B. LATTA FOR CONGRESS

Mailing Address PO BOX 106

City  
BOWLING GREEN

State  
OH

Zip Code  
43402

Purpose of Disbursement  
FEDERAL CONTRIBUTION

Candidate Name

LATTA, ROBERT EDWARD, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify)

State: OH District: 05

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	6		2	0	2	3

FEC Identification Number

C00438697

Transaction ID : SB23.11874

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

### C. OHIO GRASSROOTS VICTORY FUND

Mailing Address 600 PENNSYLVANIA AVE SE  
#15180

City  
WASHINGTON

State  
DC

Zip Code  
20003

Purpose of Disbursement  
FEDERAL CONTRIBUTION

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	7		2	0	2	3

FEC Identification Number

C00578609

Transaction ID : SB23.11881

Amount of Each Disbursement this Period

1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

5500.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

**A. ROBIN KELLY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 101199

M M M	/	D D D	/	Y Y Y Y Y
07		25		2023

City CHICAGO State IL Zip Code 60610

FEC Identification Number

Purpose of Disbursement  
FEDERAL CONTRIBUTION

C C00539866

Candidate Name  
KELLY, ROBIN, , ,

Transaction ID : SB23.11870

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
State: IL District: 02

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

Category/  
Type

500.00

Memo Item

**B. VALUE IN ELECTING WOMEN POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 228 S. WASHINGTON ST.  
STE. 115

M M M	/	D D D	/	Y Y Y Y Y
09		27		2023

City ALEXANDRIA State VA Zip Code 22314

FEC Identification Number

Purpose of Disbursement  
FEDERAL CONTRIBUTION

C C00327189

Transaction ID : SB23.11883

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Category/  
Type

3000.00

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

M M M	/	D D D	/	Y Y Y Y Y
-------	---	-------	---	-----------

City State Zip Code

FEC Identification Number

Purpose of Disbursement

C

Candidate Name

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

3500.00

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

29500.00