



A. Form/Schedule : **F3A**

Amended as requested by 4/29/10 FEC letter

Transaction ID :

**SUMMARY PAGE**

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Tom Hayhurst for Congress

Report Covering the Period:

From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)).....	98970.96	284195.38
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	98970.96	284195.38
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17).....	36276.67	50551.93
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	36276.67	50551.93
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	<b>233851.11</b>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>0.00</b>	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>0.00</b>	

**For further information contact:**

Federal Election Commission  
 999 E Street, NW  
 Washington, DC 20463  
 Toll Free 800-424-9530  
 Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name  
Tom Hayhurst for Congress

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees	70934.96	226605.46
(i) Itemized (use Schedule A).....	17536.00	25889.92
(ii) Unitemized.....	88470.96	252495.38
(iii) TOTAL of contributions from individuals..... ▶	2500.00	5000.00
(b) Political Party Committees.....	8000.00	24300.00
(c) Other Political Committees (such as PACS).....	0.00	2400.00
(d) The Candidate.....	98970.96	284195.38
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))		
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....		
	0.00	0.00
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....		
	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	207.66	207.66
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶		
	99178.62	284403.04

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES.....	36276.67	50551.93
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	36276.67	50551.93

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	170949.16
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	99178.62
25. SUBTOTAL (add Line 23 and Line 24).....	270127.78
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	36276.67
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	233851.11

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 103  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.**

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

Mailing Address 1822 Turnberry Ln

City State Zip Code  
Fort Wayne IN 46814-9330

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

Name of Employer Occupation  
Sherman Group Partner/Owner

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 29 / 2010

**Transaction ID:** C1517787

Amount of Each Receipt this Period  
1000.00

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
David Almdale

Mailing Address 15322 Powderhorn Rd

City State Zip Code  
Fort Wayne IN 46814-9758

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

Name of Employer Occupation  
Fort Wayne Orthopaedics Physician

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 31 / 2010

**Transaction ID:** C1530045

Amount of Each Receipt this Period  
500.00

500.00

**C.**

Full Name (Last, First, Middle Initial)  
Patrick Arata

Mailing Address 1400 Lincoln Tower

City State Zip Code  
Fort Wayne IN 46802

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

Name of Employer Occupation  
Arata Law Firm Attorney

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 19 / 2010

**Transaction ID:** C1446099

Amount of Each Receipt this Period  
250.00

250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1750.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 103
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) William A Argus		Date of Receipt MM / DD / YYYY 03 / 10 / 2010		
	Mailing Address 1527 Sycamore Hills Pkwy		<b>Transaction ID:</b> C1395067		
	City Fort Wayne	State IN	Zip Code 46814	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Self		Occupation Physician		
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Charles Babbs		Date of Receipt MM / DD / YYYY 03 / 25 / 2010		
	Mailing Address 804 Cumberland Ave		<b>Transaction ID:</b> C1451936		
	City West Lafayette	State IN	Zip Code 47906	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Purdue University		Occupation Professor		
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Judith Backs		Date of Receipt MM / DD / YYYY 03 / 31 / 2010		
	Mailing Address 13401 Iyopawa Island Rd.		<b>Transaction ID:</b> C1532353		
	City Coldwater	State MI	Zip Code 49036	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Requested		Occupation Requested		
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	





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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 103
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Ravindranath Bathina		Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 25665 O'Keefe Lane		<b>Transaction ID:</b> C1529959
	City Los Altos Hills	State CA	Zip Code 94022
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
	Name of Employer None	Occupation Retired	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 600.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Charles Belch		Date of Receipt MM / DD / YYYY 03 / 15 / 2010
	Mailing Address 2530 Foxchase Run		<b>Transaction ID:</b> C1399572
	City Fort Wayne	State IN	Zip Code 46825-3971
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
	Name of Employer Employee Benefit Managers	Occupation CEO	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Janet Bell		Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 4415 Old Mill Road		<b>Transaction ID:</b> C1532313
	City Fort Wayne	State IN	Zip Code 46807
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer IPFW	Occupation Professor	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	850.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 10 / 103  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.** Full Name (Last, First, Middle Initial)  
Calvin Bellamy

Mailing Address 1634 Cherry Blossom Dr Munster

City State Zip Code  
Munster IN 46321

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

Name of Employer Occupation  
Kreig DeVault LLP Attorney

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 26 / 2010

**Transaction ID:** C1514176

Amount of Each Receipt this Period  
250.00

250.00

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

Mailing Address 5601 Coldwater Rd

City State Zip Code  
Fort Wayne IN 46825-5450

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

Name of Employer Occupation  
Stucky Brothers President

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 29 / 2010

**Transaction ID:** C1517807

Amount of Each Receipt this Period  
500.00

500.00

**C.** Full Name (Last, First, Middle Initial)  
Peter Blichert

Mailing Address 1717 Maplecrest Road

City State Zip Code  
Fort Wayne IN 46815

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

Name of Employer Occupation  
None Retired

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 20 / 2010

**Transaction ID:** C1446034

Amount of Each Receipt this Period  
100.00

600.00

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

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 103  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

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

Mailing Address 1616 St. Louis

City State Zip Code  
Fort Wayne IN 46819

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

Name of Employer None Occupation Retired

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 3 / 2 4 / 2 0 1 0

**Transaction ID:** C1451160

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Timothy Bloom

Mailing Address 1425 E Ridgewood

City State Zip Code  
Columbia City IN 46725

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

Name of Employer Self Occupation Attorney

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 3 / 1 9 / 2 0 1 0

**Transaction ID:** C1430017

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Kathleen Bohnke

Mailing Address 9514 Watergrove Trail

City State Zip Code  
Fort Wayne IN 46825

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

Name of Employer Self Occupation Doctor

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 3 / 2 9 / 2 0 1 0

**Transaction ID:** C1517860

Amount of Each Receipt this Period  
250.00

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

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 103  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Lynn Bowen

Mailing Address 1155 E 455 S

City Lagrange State IN Zip Code 46761-9760

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

Name of Employer Self Occupation Dentist

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 03 / 19 / 2010  
**Transaction ID: C1430130**  
 Amount of Each Receipt this Period 500.00

**B.**

Full Name (Last, First, Middle Initial)  
Felson Bowman

Mailing Address P.O. Box 47068

City Indianapolis State IN Zip Code 46247

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

Name of Employer Solar Sources Occupation President

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 03 / 31 / 2010  
**Transaction ID: C1547057**  
 Amount of Each Receipt this Period 500.00

**C.**

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

Mailing Address 1764 Burning Tree Ln

City Carmel State IN Zip Code 46032

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

Name of Employer Browning Investments Occupation Owner

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 31 / 2010  
**Transaction ID: C1526516**  
 Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2000.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 103  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.** Full Name (Last, First, Middle Initial)  
James E Buchanan

Mailing Address 2653 County Road 60

City Auburn State IN Zip Code 46706

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

Name of Employer Fort Wayne Medical Education Program Occupation Physician

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 03 / 16 / 2010  
**Transaction ID:** C1399605  
 Amount of Each Receipt this Period: 500.00

**B.** Full Name (Last, First, Middle Initial)  
Gayle Burns

Mailing Address 11917 Eagle Creek Cv

City Fort Wayne State IN Zip Code 46814-3200

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

Name of Employer David Burns DDS Occupation Registered Nurse

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 02 / 22 / 2010  
**Transaction ID:** C1364622  
 Amount of Each Receipt this Period: 500.00

**C.** Full Name (Last, First, Middle Initial)  
Emmanuel Cabe

Mailing Address 420 Red Bluff Dr.

City Fort Wayne State IN Zip Code 46814

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

Name of Employer Brooklyn Medical Associates Occupation Physician

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: 03 / 31 / 2010  
**Transaction ID:** C1529956  
 Amount of Each Receipt this Period: 250.00

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

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 103  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.** Full Name (Last, First, Middle Initial)  
Carol S. Chandler

Mailing Address 7733 N. 1200 E., Lake Maxler

City State Zip Code  
Kendallville IN 46755

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

Name of Employer Requested Occupation Requested

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 31 / 2010

**Transaction ID:** C1537162

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Lucy Clarke

Mailing Address 6507 E Canal Pointe Ln

City State Zip Code  
Fort Wayne IN 46804-4773

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

Name of Employer None Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
01 / 14 / 2010

**Transaction ID:** C1120067

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Laurence Codding

Mailing Address 1123 W. Wayne Street

City State Zip Code  
Fort Wayne IN 46802

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

Name of Employer Self Occupation Landlord

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 08 / 2010

**Transaction ID:** C1392928

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1450.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 103  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.** Full Name (Last, First, Middle Initial)  
Steven J Cohen

Mailing Address 6606 Sweet Wood Ct

City State Zip Code  
Fort Wayne IN 46814-8125

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

Name of Employer PAI Occupation Physician

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	9	/	2	0	1	0

**Transaction ID:** C1517866

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Steve Corona

Mailing Address 428 W Sherwood Terrace

City State Zip Code  
Fort Wayne IN 46807

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

Name of Employer Job Works Occupation President

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	9	/	2	0	1	0

**Transaction ID:** C1515562

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Marvin Crell

Mailing Address 7318 Inverness Commons

City State Zip Code  
Fort Wayne IN 46804-3835

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

Name of Employer Tourkow, Crell, Rosenblatt & Johnston Occupation Attorney

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	1	/	2	0	1	0

**Transaction ID:** C1163535

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **750.00**

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 103  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.** Full Name (Last, First, Middle Initial)  
Renee Cuff

Mailing Address 1733 Cambrian Pl.

City State Zip Code  
Fort Wayne IN 46804

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

Name of Employer Occupation  
None Retired

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 24 / 2010

**Transaction ID:** C1451131

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Patrick J Daley

Mailing Address 4808 Union Chapel Rd

City State Zip Code  
Fort Wayne IN 46845

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

Name of Employer Occupation  
Parkview Cardiologist

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 15 / 2010

**Transaction ID:** C1399555

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Lorraine Davis

Mailing Address 5636 Indiana Ave.

City State Zip Code  
Fort Wayne IN 46807

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

Name of Employer Occupation  
None Retired

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
02 / 22 / 2010

**Transaction ID:** C1364627

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1450.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 103

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.**

Full Name (Last, First, Middle Initial)  
David Dilts

Mailing Address 4505 Redstone Ct.

City State Zip Code  
Fort Wayne IN 46835-4270

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

Name of Employer Occupation  
Indiana University Professor of Economics

Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 04 / 2010

Transaction ID: C1390699

Amount of Each Receipt this Period

400.00

**B.**

Full Name (Last, First, Middle Initial)  
Elaine Dodds

Mailing Address 2131 Kensington Blvd.

City State Zip Code  
Fort Wayne IN 46805

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

Name of Employer Occupation  
Pine Hill Country Day School Director

Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 21 / 2010

Transaction ID: C1163536

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)  
Elaine Dodds

Mailing Address 2131 Kensington Blvd.

City State Zip Code  
Fort Wayne IN 46805

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

Name of Employer Occupation  
Pine Hill Country Day School Director

Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 31 / 2010

Transaction ID: C1256049

Amount of Each Receipt this Period

20.00

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

520.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 103  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.** Full Name (Last, First, Middle Initial)  
Jill Downs  
Mailing Address 1202 Elmwood Ave  
City Fort Wayne State IN Zip Code 46805-4213  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Parkview Hospital Occupation Medical Technologist  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
500.00  
Date of Receipt 03 / 08 / 2010  
Transaction ID: C1392936  
Amount of Each Receipt this Period 500.00

**B.** Full Name (Last, First, Middle Initial)  
Donald Doxsee  
Mailing Address 323 W. Berry St.  
City Fort Wayne State IN Zip Code 46802  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Attorney  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
225.00  
Date of Receipt 03 / 19 / 2010  
Transaction ID: C1446094  
Amount of Each Receipt this Period 125.00

**C.** Full Name (Last, First, Middle Initial)  
Stephen Dunlop  
Mailing Address 5105 N Illinois St  
City Indianapolis State IN Zip Code 46208-2613  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Wishard Hospital Occupation Physician  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
750.00  
Date of Receipt 03 / 29 / 2010  
Transaction ID: C1517803  
Amount of Each Receipt this Period 750.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1375.00**  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 103  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.** Full Name (Last, First, Middle Initial)  
Lowell Dusseau

Mailing Address 10619 Alderwood Lane

City State Zip Code  
Fort Wayne IN 46845

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

Name of Employer None Occupation Retired

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 11 / 2010

**Transaction ID:** C1398279

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 13910 Spring Hollow Road

City State Zip Code  
Fort Wayne IN 46814

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

Name of Employer None Occupation Retired

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 17 / 2010

**Transaction ID:** C1402208

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
Vernell Fettig

Mailing Address 1502 Hawthorne Road

City State Zip Code  
Fort Wayne IN 46802

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

Name of Employer None Occupation Retired

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 04 / 2010

**Transaction ID:** C1390441

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1450.00**

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

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

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

FOR LINE NUMBER: PAGE 21 / 103

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.**

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

Mailing Address 10917 Birkdale Ct

City State Zip Code  
Fort Wayne IN 46814-9312

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

Name of Employer Occupation  
Barrett & McNagney Attorney

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 04 / 2010

Transaction ID: C1390422

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)  
Benjamin Fordham

Mailing Address 22 Campbell Rd

City State Zip Code  
Binghamton NY 13905-4304

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

Name of Employer Occupation  
Binghamton University Professor

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 01 / 2010

Transaction ID: C1388439

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)  
Patricia Fox

Mailing Address 1222 Westover Road

City State Zip Code  
Fort Wayne IN 46807

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

Name of Employer Occupation  
Connections Counseling Services Counselor

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2010

Transaction ID: C1532338

Amount of Each Receipt this Period

500.00

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

1050.00

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

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

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

FOR LINE NUMBER: PAGE 22 / 103  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.** Full Name (Last, First, Middle Initial)  
Richard E. Fox

Mailing Address 1320 Westover Road

City State Zip Code  
Fort Wayne IN 46807

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

Name of Employer Barrett & McNagny Occupation Attorney

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 22 / 2010

**Transaction ID:** C1446040

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Indra Frank

Mailing Address 6822 Bruton Dr

City State Zip Code  
Indianapolis IN 46256

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

Name of Employer Self Occupation Radiologist

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 29 / 2010

**Transaction ID:** C1515569

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Elizabeth Frederick

Mailing Address 6710 W Canal Pointe Ln

City State Zip Code  
Fort Wayne IN 46804-4770

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

Name of Employer Social Security Administration Occupation Attorney

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 24 / 2010

**Transaction ID:** C1451157

Amount of Each Receipt this Period  
250.00

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

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 103

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.**

Full Name (Last, First, Middle Initial)

Avis Ann Ann Frellick

Mailing Address 1705 Curdes Ave.

City State Zip Code  
Fort Wayne IN 46805

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

Name of Employer Occupation  
None Retired

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 15 / 2010

Transaction ID: C1399558

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Terry Gaff

Mailing Address 103 Crescent Ave.

City State Zip Code  
Kendallville IN 46755

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

Name of Employer Occupation  
Professional Emergency Ph-ysicians Physician

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 11 / 2010

Transaction ID: C1353127

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Una Gallagher-Pulizzi

Mailing Address 5318 Glenwood Rd

City State Zip Code  
Bethesda MD 20814-1406

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

Name of Employer Occupation  
GE Communications

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 29 / 2010

Transaction ID: C1517815

Amount of Each Receipt this Period

300.00

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

1800.00

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

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

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

FOR LINE NUMBER: PAGE 24 / 103  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.** Full Name (Last, First, Middle Initial)  
Jonathon Gentile  
 Mailing Address 15315 Tonkel Road  
 City State Zip Code  
 Leo IN 46765  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 31 / 2010  
**Transaction ID:** C1537158  
 Amount of Each Receipt this Period  
 250.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Physician  
 Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 250.00

**B.** Full Name (Last, First, Middle Initial)  
Geoff Gephart  
 Mailing Address 1731 Sycamore Hills Dr.  
 City State Zip Code  
 Fort Wayne IN 46814  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 31 / 2010  
**Transaction ID:** C1530035  
 Amount of Each Receipt this Period  
 250.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Parkview Health Occupation Nurse  
 Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 250.00

**C.** Full Name (Last, First, Middle Initial)  
Daniel Gerson  
 Mailing Address 444 15th Street #26  
 City State Zip Code  
 Brooklyn NY 11215  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 29 / 2010  
**Transaction ID:** C1517858  
 Amount of Each Receipt this Period  
 500.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Jewish Child Care Association Occupation Media & Alumni Coordinator  
 Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1000.00  
**TOTAL** This Period (last page this line number only) ..... ►





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

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

FOR LINE NUMBER: PAGE 26 / 103  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.** Full Name (Last, First, Middle Initial)  
Alan Grinsfelder  
Mailing Address 2131 Forest Park Blvd.  
City Fort Wayne State IN Zip Code 46805  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Grinsfelder Associates Occupation Architect  
Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 250.00  
Date of Receipt 02 / 22 / 2010  
Transaction ID: C1364617  
Amount of Each Receipt this Period 250.00

**B.** Full Name (Last, First, Middle Initial)  
Ted Grisell  
Mailing Address 10551 N. 800 W.  
City Fairland State IN Zip Code 46126  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Physician  
Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1250.00  
Date of Receipt 02 / 22 / 2010  
Transaction ID: C1364630  
Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Ramabrahmam Gullapalli  
Mailing Address 10638 Maple Springs Cove  
City Fort Wayne State IN Zip Code 46845  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Preferred Anesthesia Consultants Occupation Physician  
Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00  
Date of Receipt 03 / 08 / 2010  
Transaction ID: C1392921  
Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1750.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 103  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

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

Mailing Address 111 E Wayne St  
Ste 800

City State Zip Code  
Fort Wayne IN 46802-2600

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

Name of Employer Occupation  
Baker Daniels Attorney

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 30 / 2010

**Transaction ID:** C1524741

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Patricia Hays

Mailing Address 2831 Little Turtle Trail

City State Zip Code  
Fort Wayne IN 46804

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

Name of Employer Occupation  
Lutheran Health Network Health Care

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 24 / 2010

**Transaction ID:** C1535354

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 4204 N Washington Rd

City State Zip Code  
Fort Wayne IN 46804-1824

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

Name of Employer Occupation  
Baker & Daniel Attorney

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 30 / 2010

**Transaction ID:** C1524713

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1500.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 103  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.** Full Name (Last, First, Middle Initial)  
Jerome Henry, Jr.  
Mailing Address P.O. Box 11572

City State Zip Code  
Fort Wayne IN 46859

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

Name of Employer Occupation  
Midwest Pipe and Steel Owner

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 31 / 2010

**Transaction ID:** C1529968

Amount of Each Receipt this Period  
1000.00

2000.00

**B.** Full Name (Last, First, Middle Initial)  
Sara Lynn Henry  
Mailing Address 345 Chestnut Hill Rd.

City State Zip Code  
Woodstock NY 12498

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

Name of Employer Occupation  
Drew University Professor Emerita

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 16 / 2010

**Transaction ID:** C1399664

Amount of Each Receipt this Period  
250.00

250.00

**C.** Full Name (Last, First, Middle Initial)  
Thomas Herr  
Mailing Address PO Box 2263

City State Zip Code  
Fort Wayne IN 46801

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

Name of Employer Occupation  
Self Attorney

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 29 / 2010

**Transaction ID:** C1517850

Amount of Each Receipt this Period  
400.00

2400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1650.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 103  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.** Full Name (Last, First, Middle Initial)  
Roger Hirt

Mailing Address 11707 Eagle Lake Court

City State Zip Code  
Fort Wayne IN 46814

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

Name of Employer None Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 570.00

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

**Transaction ID:** C1256043

Amount of Each Receipt this Period  
20.00

**B.** Full Name (Last, First, Middle Initial)  
Shirley Hirt

Mailing Address 11707 Eagle Lake Court

City State Zip Code  
Fort Wayne IN 46814

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

Name of Employer None Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 779.96

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

**Transaction ID:** C1256044

Amount of Each Receipt this Period  
10.00

**C.** Full Name (Last, First, Middle Initial)  
Shirley Hirt

Mailing Address 11707 Eagle Lake Court

City State Zip Code  
Fort Wayne IN 46814

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

Name of Employer None Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 779.96

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

**Transaction ID:** C1301985

Amount of Each Receipt this Period  
13.00

\* In-Kind: Stamps, paper and ink

**SUBTOTAL** of Receipts This Page (optional) ..... ► **43.00**

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

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

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

FOR LINE NUMBER: PAGE 30 / 103  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.** Full Name (Last, First, Middle Initial)  
Shirley Hirt  
Mailing Address 11707 Eagle Lake Court  
City Fort Wayne State IN Zip Code 46814  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 779.96  
Date of Receipt 02 / 17 / 2010  
Transaction ID: C1360723  
Amount of Each Receipt this Period 10.00

**B.** Full Name (Last, First, Middle Initial)  
Shirley Hirt  
Mailing Address 11707 Eagle Lake Court  
City Fort Wayne State IN Zip Code 46814  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 779.96  
Date of Receipt 03 / 10 / 2010  
Transaction ID: C1447093  
Amount of Each Receipt this Period 96.96  
\* In-Kind: Office Supplies

**C.** Full Name (Last, First, Middle Initial)  
Shirley Hirt  
Mailing Address 11707 Eagle Lake Court  
City Fort Wayne State IN Zip Code 46814  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 779.96  
Date of Receipt 03 / 26 / 2010  
Transaction ID: C1514175  
Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 206.96  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 31 / 103

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Mark Hochstetler

Mailing Address 2821 Emerald Lake Dr.

City State Zip Code  
Fort Wayne IN 46804

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

Name of Employer Occupation  
None Retired

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 29 / 2010

Transaction ID: C1517844

Amount of Each Receipt this Period  
500.00

**B.**

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

Mailing Address 4400 N. Washington Rd.

City State Zip Code  
Fort Wayne IN 46804

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

Name of Employer Occupation  
Canturbury School Assistant Nurse

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 310.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 31 / 2010

Transaction ID: C1256041

Amount of Each Receipt this Period  
10.00

**C.**

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

Mailing Address 4400 N. Washington Rd.

City State Zip Code  
Fort Wayne IN 46804

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

Name of Employer Occupation  
Canturbury School Assistant Nurse

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 310.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 25 / 2010

Transaction ID: C1451940

Amount of Each Receipt this Period  
50.00

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

560.00

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





# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 103

(check only one)

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

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

NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Lynda Horton

Mailing Address 2815 Covington Road

City State Zip Code  
Fort Wayne IN 46802-6913

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

Name of Employer Occupation  
Canterbury School Teacher

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 550.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2010

Transaction ID: C1531421

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)  
Jon Ingleman

Mailing Address 223 E Tillman Rd

City State Zip Code  
Fort Wayne IN 46816

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

Name of Employer Occupation  
Self Orthodontist

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2010

Transaction ID: C1530002

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Sushil K Jain

Mailing Address 11230 Chestnut Ridge Ct

City State Zip Code  
Fort Wayne IN 46814-9036

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

Name of Employer Occupation  
Lutheran Medical Group Physician

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 16 / 2010

Transaction ID: C1399604

Amount of Each Receipt this Period

250.00

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

1300.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 103  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.** Full Name (Last, First, Middle Initial)  
Kris Jensen

Mailing Address 10720 Braeburn Ct

City State Zip Code  
Fort Wayne IN 46804-4611

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

Name of Employer Occupation  
SCAN Inc. Social Worker

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 29 / 2010

Transaction ID: C1517877

Amount of Each Receipt this Period  
250.00

750.00

**B.** Full Name (Last, First, Middle Initial)  
Thom Johnston

Mailing Address 4123 Old Mill Road

City State Zip Code  
Fort Wayne IN 46807

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

Name of Employer Occupation  
None Retired

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
02 / 08 / 2010

Transaction ID: C1301856

Amount of Each Receipt this Period  
1250.00

1250.00

**C.** Full Name (Last, First, Middle Initial)  
Sally Jones

Mailing Address 108 Cameron Mews

City State Zip Code  
Alexandria VA 22314

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

Name of Employer Occupation  
National Center for Family Philanthrop Senior Director

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 15 / 2010

Transaction ID: C1399564

Amount of Each Receipt this Period  
750.00

750.00

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

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 103  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.** Full Name (Last, First, Middle Initial)  
Allan Kauffman  
Mailing Address 305 Gra Roy Dr.  
City Goshen State IN Zip Code 46526  
FEC ID number of contributing federal political committee. **C**  
Name of Employer City of Goshen Occupation Mayor  
Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 350.00  
Date of Receipt 03 / 30 / 2010  
Transaction ID: C1524714  
Amount of Each Receipt this Period 350.00

**B.** Full Name (Last, First, Middle Initial)  
Jean Kenline  
Mailing Address 7504 Wohama Dr  
City Fort Wayne State IN Zip Code 46819-1765  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired Nurse  
Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00  
Date of Receipt 03 / 10 / 2010  
Transaction ID: C1395056  
Amount of Each Receipt this Period 500.00

**C.** Full Name (Last, First, Middle Initial)  
Zubair Khan  
Mailing Address 4407 Sandia Run  
City Fort Wayne State IN Zip Code 46845-9074  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Fort Wayne Vision Associates Occupation Optometrist  
Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00  
Date of Receipt 03 / 04 / 2010  
Transaction ID: C1390701  
Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1350.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 103

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Christopher Kowalski

Mailing Address 10608 Callander Ct

City State Zip Code  
Fort Wayne IN 46814-9316

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

Name of Employer Occupation  
Summit Radiology Physician

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 29 / 2010

Transaction ID: C1517870

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)  
Jeffrey Krull

Mailing Address 3017 Oak Borough Run

City State Zip Code  
Fort Wayne IN 46804-7808

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

Name of Employer Occupation  
Allen County Public Library Director

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 30 / 2010

Transaction ID: C1524742

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)  
David Kuker

Mailing Address 9409 White Shell

City State Zip Code  
Fort Wayne IN 46804

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

Name of Employer Occupation  
Baker Daniels Attorney

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2010

Transaction ID: C1529662

Amount of Each Receipt this Period

500.00

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

1000.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 103  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.** Full Name (Last, First, Middle Initial)  
Il-Sung Kwak  
Mailing Address 2222 Timberbrook Trl  
City Fort Wayne State IN Zip Code 46845-9530  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Employed Occupation Physician  
Receipt For: 2010 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼  
Amount of Each Receipt this Period 250.00  
Transaction ID: C1524785

**B.** Full Name (Last, First, Middle Initial)  
Karen Lang  
Mailing Address 11231 Chestnut Ridge Ct.  
City Fort Wayne State IN Zip Code 46814  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For: 2010 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼  
Amount of Each Receipt this Period 1000.00  
Transaction ID: C1399561

**C.** Full Name (Last, First, Middle Initial)  
Jon Laramore  
Mailing Address 6530 Cricklewood Rd  
City Indianapolis State IN Zip Code 46220  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Baker Daniels Occupation Attorney  
Receipt For: 2010 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼  
Amount of Each Receipt this Period 250.00  
Transaction ID: C1451132

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1500.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 38 / 103

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Susan Larrabee

Mailing Address 5016 Indiana Ave.

City State Zip Code  
Fort Wayne IN 46807

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

Name of Employer Occupation  
Brooklyn Medical Requested

Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2010

Transaction ID: C1530077

Amount of Each Receipt this Period

400.00

**B.**

Full Name (Last, First, Middle Initial)  
Antoinette Lee

Mailing Address 3480 W 1200 N

City State Zip Code  
Decatur IN 46733-8782

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

Name of Employer Occupation  
Requested Requested

Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 15 / 2010

Transaction ID: C1399576

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)  
Louis Lopez

Mailing Address 15715 Bald Eagle Way

City State Zip Code  
Huntertown IN 46748-9216

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

Name of Employer Occupation  
Allen County Cardiology Physician

Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 26 / 2010

Transaction ID: C1514172

Amount of Each Receipt this Period

500.00

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

1150.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 103
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) James Luckey		Date of Receipt MM / DD / YYYY 03 / 30 / 2010		
	Mailing Address 4701 Covington Ave. Unit 1		<b>Transaction ID:</b> C1524818		
	City Fort Wayne	State IN	Zip Code 46804	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer None	Occupation Retired			
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Mary M Maloney		Date of Receipt MM / DD / YYYY 03 / 29 / 2010		
	Mailing Address 2821 Emerald Lake Dr		<b>Transaction ID:</b> C1517843		
	City Fort Wayne	State IN	Zip Code 46804	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer None	Occupation Retired			
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Russell V Maples		Date of Receipt MM / DD / YYYY 03 / 16 / 2010		
	Mailing Address 10526 Glen Arbor Pass		<b>Transaction ID:</b> C1399671		
	City Fort Wayne	State IN	Zip Code 46814-9541	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Allergy & Asthma Center	Occupation Allergist			
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 103  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Victor Martin</p> <p>Mailing Address 4201 Indiana Ave</p> <p>City State Zip Code Fort Wayne IN 46807-2530</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Martin-Riley Partner</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">03 / 30 / 2010</span></p> <p><b>Transaction ID:</b> C1524724</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">250.00</span></p>
--	---

<p><b>B.</b> Full Name (Last, First, Middle Initial) Walter Martiny</p> <p>Mailing Address 11110 Kings Crossing</p> <p>City State Zip Code Fort Wayne IN 46845</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation None Retired</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">03 / 20 / 2010</span></p> <p><b>Transaction ID:</b> C1446019</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">250.00</span></p>
--	---

<p><b>C.</b> Full Name (Last, First, Middle Initial) George McKay</p> <p>Mailing Address 2833 Windpump Rd.</p> <p>City State Zip Code Fort Wayne IN 46804</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation None Retired</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">03 / 01 / 2010</span></p> <p><b>Transaction ID:</b> C1388433</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">500.00</span></p>
---	---

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px; display: block;">1000.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px; display: block;"> </span>



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 103  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.** Full Name (Last, First, Middle Initial)  
Marnie McKinney

Mailing Address 8433 Bay Colony Drive

City Indianapolis State IN Zip Code 46234

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

Name of Employer First Indiana Bank Occupation CEO

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt 03 / 01 / 2010  
**Transaction ID: C1388443**  
 Amount of Each Receipt this Period 2400.00

**B.** Full Name (Last, First, Middle Initial)  
Sandra McMillin

Mailing Address 22800 Springwood Dr.

City Elkhart State IN Zip Code 46514

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

Name of Employer None Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 03 / 01 / 2010  
**Transaction ID: C1388463**  
 Amount of Each Receipt this Period 250.00

**C.** Full Name (Last, First, Middle Initial)  
Linda McMurray

Mailing Address 1919 S Hadley Rd

City Fort Wayne State IN Zip Code 46804-1461

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

Name of Employer None Occupation None

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 03 / 10 / 2010  
**Transaction ID: C1395068**  
 Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3150.00**

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

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

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

FOR LINE NUMBER: PAGE 42 / 103  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.** Full Name (Last, First, Middle Initial)  
Rachel McNett  
Mailing Address 9011 Woodridge Drive  
City State Zip Code  
New Haven IN 46774  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
None Retired  
Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 410.00  
Date of Receipt  
M M / D D / Y Y Y Y Y  
0 1 / 3 1 / 2 0 1 0  
Transaction ID: C1256031  
Amount of Each Receipt this Period  
10.00

**B.** Full Name (Last, First, Middle Initial)  
Rachel McNett  
Mailing Address 9011 Woodridge Drive  
City State Zip Code  
New Haven IN 46774  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
None Retired  
Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 410.00  
Date of Receipt  
M M / D D / Y Y Y Y Y  
0 3 / 0 1 / 2 0 1 0  
Transaction ID: C1388457  
Amount of Each Receipt this Period  
400.00

**C.** Full Name (Last, First, Middle Initial)  
Monroe Richard Miller  
Mailing Address 17716 Downing Dr  
City State Zip Code  
Lowell IN 46356  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Church the King Episcopal Church Priest  
Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 600.00  
Date of Receipt  
M M / D D / Y Y Y Y Y  
0 3 / 3 0 / 2 0 1 0  
Transaction ID: C1524833  
Amount of Each Receipt this Period  
600.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1010.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 103
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Thomas Miller	Date of Receipt MM / DD / YYYY 03 / 19 / 2010
	Mailing Address 275 Ln 530 Lake James	<b>Transaction ID:</b> C1430128
	City State Zip Code Fremont IN 46737	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Tri State Primary Care Physician	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) John Mohrman	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 5506 Tunbridge Crossing	<b>Transaction ID:</b> C1532323
	City State Zip Code Fort Wayne IN 46815-8537	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Brooklyn Medical Associates MD	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Michael S Mohrman	Date of Receipt MM / DD / YYYY 03 / 01 / 2010
	Mailing Address 5448 E 500 S-57	<b>Transaction ID:</b> C1388432
	City State Zip Code Churubusco IN 46723	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Brooklyn Medical Associates Physician	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 44 / 103

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Winfield C. Moses, Jr.

Mailing Address 1203 Three Rivers North

City State Zip Code  
Fort Wayne IN 46802

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

Name of Employer Self Occupation Builder

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 29 / 2010

Transaction ID: C1517832

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)  
Lenora Murphy

Mailing Address 8517 Crenshaw Ct.

City State Zip Code  
Fort Wayne IN 46835

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

Name of Employer FW Community Schools Occupation Teacher

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 13 / 2010

Transaction ID: C1398280

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)  
Barbara Musselman

Mailing Address 4140 N. Washington Rd.

City State Zip Code  
Fort Wayne IN 46804

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

Name of Employer None Occupation Homemaker

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2010

Transaction ID: C1532328

Amount of Each Receipt this Period

500.00

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

850.00

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

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

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

FOR LINE NUMBER: PAGE 45 / 103  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.** Full Name (Last, First, Middle Initial)  
Jimmy Nash

Mailing Address 1915 Randallia Drive

City State Zip Code  
Fort Wayne IN 46805-4631

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

Name of Employer Occupation  
None Retired

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

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

**Transaction ID:** C1364625

Amount of Each Receipt this Period  
400.00

400.00

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

Mailing Address 5810 Kimberley Rd

City State Zip Code  
Fort Wayne IN 46809-2147

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

Name of Employer Occupation  
Self Painter

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

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

**Transaction ID:** C1524702

Amount of Each Receipt this Period  
500.00

500.00

**C.** Full Name (Last, First, Middle Initial)  
Barbara Nohinek

Mailing Address 2736 Covington Hollow Trl

City State Zip Code  
Fort Wayne IN 46804-6146

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

Name of Employer Occupation  
Self Physician

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

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

**Transaction ID:** C1353125

Amount of Each Receipt this Period  
500.00

500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1400.00**

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

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

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

FOR LINE NUMBER: PAGE 46 / 103  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.** Full Name (Last, First, Middle Initial)  
Andrew O'Shaughnessy  
 Mailing Address 3223 Emerald Lake Dr  
 City State Zip Code  
 Fort Wayne IN 46804-2411  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Indiana Medical Associates Physician  
 Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 1 / 1 9 / 2 0 1 0  
**Transaction ID:** C1149713  
 Amount of Each Receipt this Period  
 2000.00

**B.** Full Name (Last, First, Middle Initial)  
Michael Parrott  
 Mailing Address 6729 Mallard Cove Pl  
 City State Zip Code  
 Fort Wayne IN 46804-2887  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Delphi Inc Executive  
 Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 3 / 1 5 / 2 0 1 0  
**Transaction ID:** C1399580  
 Amount of Each Receipt this Period  
 300.00

**C.** Full Name (Last, First, Middle Initial)  
W. David Pepple  
 Mailing Address 6001 Ranger Trail  
 City State Zip Code  
 Fort Wayne IN 46835-3732  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Self Physician  
 Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 1 / 1 1 / 2 0 1 0  
**Transaction ID:** C1113835  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2550.00**  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 47 / 103

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Rhonda Phillips

Mailing Address 1800 West 900 North - 90

City State Zip Code  
Markle IN 46770

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

Name of Employer Self Occupation  
Physician

Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 01 / 2010

Transaction ID: C1388455

Amount of Each Receipt this Period  
500.00

**B.**

Full Name (Last, First, Middle Initial)  
Sandra Poling

Mailing Address 2906 Hollendale Dr.

City State Zip Code  
New Haven IN 46774

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

Name of Employer Requested Occupation Requested

Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 30 / 2010

Transaction ID: C1524727

Amount of Each Receipt this Period  
300.00

**C.**

Full Name (Last, First, Middle Initial)  
William W Pond

Mailing Address 5730 Autumn Woods Tr

City State Zip Code  
Fort Wayne IN 46835

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

Name of Employer Associated Anesthesiologists Occupation Physician

Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 05 / 2010

Transaction ID: C1391610

Amount of Each Receipt this Period  
1000.00

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

1800.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 48 / 103</span> (check only one) <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Patricia Prentice Mailing Address 2344 W Harrison St Unit #2 City State Zip Code Chicago IL 60612 FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span> Name of Employer Occupation Rush University Medical Center Administrator Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Date of Receipt <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>3</td><td>1</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> Transaction ID: C1530012 Amount of Each Receipt this Period <table border="1" style="width: 100%;"> <tr> <td style="width: 80%;"></td> <td style="text-align: right;">250.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	3	1	/	2	0	1	0		250.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	3	/	3	1	/	2	0	1	0														
	250.00																						

<b>B.</b> Full Name (Last, First, Middle Initial) Kevin Rahn Mailing Address 4212 Folkstone Dr City State Zip Code Fort Wayne IN 46814-9783 FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span> Name of Employer Occupation Fort Wayne Orthopaedics Physician Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Date of Receipt <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>0</td><td>1</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> Transaction ID: C1388430 Amount of Each Receipt this Period <table border="1" style="width: 100%;"> <tr> <td style="width: 80%;"></td> <td style="text-align: right;">500.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	0	1	/	2	0	1	0		500.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	3	/	0	1	/	2	0	1	0														
	500.00																						

<b>C.</b> Full Name (Last, First, Middle Initial) Beryl L Randolph Mailing Address 14010 Southern Spring Ln. City State Zip Code Houston TX 77044 FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span> Name of Employer Occupation Self Employed Physician Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Date of Receipt <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>2</td><td>5</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> Transaction ID: C1451934 Amount of Each Receipt this Period <table border="1" style="width: 100%;"> <tr> <td style="width: 80%;"></td> <td style="text-align: right;">125.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	2	5	/	2	0	1	0		125.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	3	/	2	5	/	2	0	1	0														
	125.00																						

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	<table border="1" style="width: 100%;"> <tr> <td style="text-align: right;">875.00</td> </tr> </table>	875.00
875.00		
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<table border="1" style="width: 100%;"> <tr> <td style="height: 20px;"></td> </tr> </table>	



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

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

FOR LINE NUMBER: PAGE 49 / 103

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Beryl L Randolph

Mailing Address 14010 Southern Spring Ln.

City State Zip Code  
Houston TX 77044

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

Name of Employer Occupation  
Self Employed Physician

Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 29 / 2010

Transaction ID: C1516024

Amount of Each Receipt this Period

125.00

**B.**

Full Name (Last, First, Middle Initial)  
Mohan K Rao

Mailing Address 208 Chestnut Hills Pkwy

City State Zip Code  
Fort Wayne IN 46814-8923

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

Name of Employer Occupation  
ENT Assoc. Inc. Physician

Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 08 / 2010

Transaction ID: C1301860

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)  
Patricia Rauh

Mailing Address 4607 E 100 N

City State Zip Code  
Albion IN 46701

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

Name of Employer Occupation  
Self Nurse

Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 320.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 31 / 2010

Transaction ID: C1256051

Amount of Each Receipt this Period

150.00

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

575.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 50 / 103

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.**

Full Name (Last, First, Middle Initial)

Patricia Rauh

Mailing Address 4607 E 100 N

City State Zip Code  
Albion IN 46701

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

Name of Employer Self Occupation  
Nurse

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 320.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 7 / 2 0 1 0

Transaction ID: C1360730

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Patricia Rauh

Mailing Address 4607 E 100 N

City State Zip Code  
Albion IN 46701

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

Name of Employer Self Occupation  
Nurse

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 320.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 6 / 2 0 1 0

Transaction ID: C1381334

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Patricia Rauh

Mailing Address 4607 E 100 N

City State Zip Code  
Albion IN 46701

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

Name of Employer Self Occupation  
Nurse

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 320.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 4 / 2 0 1 0

Transaction ID: C1390427

Amount of Each Receipt this Period

150.00

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

170.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 51 / 103  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.** Full Name (Last, First, Middle Initial)  
Sheila Rich

Mailing Address 13356 Liberty Mills Rd.

City State Zip Code  
Fort Wayne IN 46814

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

Name of Employer Occupation  
Lutheran Medical Group Physician

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 29 / 2010

**Transaction ID:** C1517868

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Randy Roberts

Mailing Address 17636 Coldwater Road

City State Zip Code  
Huntertown IN 46748

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

Name of Employer Occupation  
Lincoln Printing Printer

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
01 / 31 / 2010

**Transaction ID:** C1256036

Amount of Each Receipt this Period  
10.00

**C.** Full Name (Last, First, Middle Initial)  
Randy Roberts

Mailing Address 17636 Coldwater Road

City State Zip Code  
Huntertown IN 46748

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

Name of Employer Occupation  
Lincoln Printing Printer

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 17 / 2010

**Transaction ID:** C1402239

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **710.00**

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

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

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

FOR LINE NUMBER: PAGE 52 / 103  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.** Full Name (Last, First, Middle Initial)  
William Roberts  
 Mailing Address 6216 Post Brook Lane  
 City State Zip Code  
 Fort Wayne IN 46835  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 0 2 / 0 8 / 2 0 1 0  
**Transaction ID:** C1301865  
 Amount of Each Receipt this Period  
 500.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer None Occupation Retired  
 Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

**B.** Full Name (Last, First, Middle Initial)  
Helen Runge  
 Mailing Address 7223 Illinois Road  
 City State Zip Code  
 Fort Wayne IN 46804  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 0 2 / 2 6 / 2 0 1 0  
**Transaction ID:** C1381327  
 Amount of Each Receipt this Period  
 40.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer None Occupation Retired  
 Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 290.00

**C.** Full Name (Last, First, Middle Initial)  
Kay Safirstein  
 Mailing Address PO Box 225  
 City State Zip Code  
 Churubusco IN 46723-0225  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 0 2 / 1 6 / 2 0 1 0  
**Transaction ID:** C1356802  
 Amount of Each Receipt this Period  
 1000.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer None Occupation Retired  
 Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1540.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 53 / 103  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

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

Mailing Address 1209 Illsley Drive

City State Zip Code  
Fort Wayne IN 46807

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

Name of Employer None Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

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

**Transaction ID:** C1531379

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Cheryl Stark

Mailing Address 1325 W. Wayne Street

City State Zip Code  
Fort Wayne IN 46802

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

Name of Employer None Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

**Transaction ID:** C1355212

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Jack Stark

Mailing Address 1325 W. Wayne Street

City State Zip Code  
Fort Wayne IN 46802

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

Name of Employer None Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

**Transaction ID:** C1353135

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **600.00**

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

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

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

FOR LINE NUMBER: PAGE 54 / 103  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.** Full Name (Last, First, Middle Initial)  
Jessica Stephenson  
Mailing Address 11104 Creekwood Ct.  
City Fort Wayne State IN Zip Code 46814  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Student  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 250.00  
Date of Receipt: 03 / 30 / 2010  
Transaction ID: C1524831  
Amount of Each Receipt this Period: 250.00

**B.** Full Name (Last, First, Middle Initial)  
Brian Stier  
Mailing Address 4522 Beaver Ave.  
City Fort Wayne State IN Zip Code 46807  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Attorney  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 550.00  
Date of Receipt: 03 / 26 / 2010  
Transaction ID: C1514179  
Amount of Each Receipt this Period: 100.00

**C.** Full Name (Last, First, Middle Initial)  
Andre B Stovall  
Mailing Address 10865 S 700 E-92  
City Roanoke State IN Zip Code 46783-9231  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Summit Radiology Occupation Physician  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 500.00  
Date of Receipt: 03 / 31 / 2010  
Transaction ID: C1529963  
Amount of Each Receipt this Period: 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 850.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 55 / 103  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.** Full Name (Last, First, Middle Initial)  
Mitchell Stucky

Mailing Address 1234 E. Dupont

City State Zip Code  
Fort Wayne IN 46825

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

Name of Employer Occupation  
Parkview Health MD

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 30 / 2010

**Transaction ID:** C1524912

Amount of Each Receipt this Period  
750.00

750.00

**B.** Full Name (Last, First, Middle Initial)  
Kathleen Summers

Mailing Address 10620 Uncas Trail

City State Zip Code  
Fort Wayne IN 46804

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

Name of Employer Occupation  
None Homemaker

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
02 / 08 / 2010

**Transaction ID:** C1301849

Amount of Each Receipt this Period  
250.00

425.00

**C.** Full Name (Last, First, Middle Initial)  
Ruth Ann Swint

Mailing Address 1812 Prestwick Ln

City State Zip Code  
Fort Wayne IN 46814-9317

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

Name of Employer Occupation  
None Retired

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
01 / 25 / 2010

**Transaction ID:** C1180881

Amount of Each Receipt this Period  
250.00

250.00

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

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

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

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

FOR LINE NUMBER: PAGE 56 / 103  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Hassan N Taki

Mailing Address 4424 E. State Blvd.

City State Zip Code  
Fort Wayne IN 46815

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

Name of Employer  
Fort Wayne Medical Institute

Occupation  
Physician

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 29 / 2010

**Transaction ID: C1517878**

Amount of Each Receipt this Period  
500.00

500.00

**B.**

Full Name (Last, First, Middle Initial)  
Hugh Taylor

Mailing Address 449 County Road 39

City State Zip Code  
Waterloo IN 46793-9777

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

Name of Employer  
Self

Occupation  
Attorney

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
01 / 21 / 2010

**Transaction ID: C1163538**

Amount of Each Receipt this Period  
500.00

520.00

**C.**

Full Name (Last, First, Middle Initial)  
Hugh Taylor

Mailing Address 449 County Road 39

City State Zip Code  
Waterloo IN 46793-9777

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

Name of Employer  
Self

Occupation  
Attorney

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
01 / 31 / 2010

**Transaction ID: C1256046**

Amount of Each Receipt this Period  
20.00

520.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1020.00**

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 57 / 103  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.** Full Name (Last, First, Middle Initial)  
Philip Terrill  
 Mailing Address 2828 Mallard Cove  
 City State Zip Code  
 Fort Wayne IN 46804  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Tremper, Bechert, Leonard & Terrill Attorney  
 Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 05 / 2010  
**Transaction ID:** C1391621  
 Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
Timothy Thut  
 Mailing Address 1104 S. 7th St.  
 City State Zip Code  
 Goshen IN 46526  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Goshen Family Physicians Physician  
 Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 02 / 11 / 2010  
**Transaction ID:** C1353128  
 Amount of Each Receipt this Period  
 300.00

**C.** Full Name (Last, First, Middle Initial)  
Satya Tummala  
 Mailing Address 1010 Tamar Cove  
 City State Zip Code  
 Fort Wayne IN 46825-7258  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Preferred Anesthesia Consultants Physician  
 Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 02 / 01 / 2010  
**Transaction ID:** C1256533  
 Amount of Each Receipt this Period  
 400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1200.00**  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 58 / 103  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.** Full Name (Last, First, Middle Initial)  
Joe Tynan  
Mailing Address 70 Elms T40 Ln.  
City Leesburg State IN Zip Code 46538  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Ambassador Steel Occupation Business Development Mgr.  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
500.00  
Date of Receipt 03 / 19 / 2010  
Transaction ID: C1430114  
Amount of Each Receipt this Period 500.00

**B.** Full Name (Last, First, Middle Initial)  
Joan Uebelhoer  
Mailing Address 4428 Mirada Drive  
City Fort Wayne State IN Zip Code 46816  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
500.00  
Date of Receipt 02 / 16 / 2010  
Transaction ID: C1356808  
Amount of Each Receipt this Period 500.00

**C.** Full Name (Last, First, Middle Initial)  
Nancy Venderly  
Mailing Address 5220 Nassau Dr.  
City Fort Wayne State IN Zip Code 46815  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
250.00  
Date of Receipt 03 / 20 / 2010  
Transaction ID: C1446021  
Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1250.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 / 103  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

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

Mailing Address 11811 Eagle Creek Pass

City State Zip Code  
Fort Wayne IN 46814-3256

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

Name of Employer Self Occupation  
Self Physician

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 25 / 2010

Transaction ID: C1451943

Amount of Each Receipt this Period  
125.00

1325.00

**B.** Full Name (Last, First, Middle Initial)  
Jonathan Walker

Mailing Address 11811 Eagle Creek Pass

City State Zip Code  
Fort Wayne IN 46814-3256

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

Name of Employer Self Occupation  
Self Physician

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 29 / 2010

Transaction ID: C1515552

Amount of Each Receipt this Period  
200.00

1325.00

**C.** Full Name (Last, First, Middle Initial)  
Karen Walker

Mailing Address 3729 Sandpoint Rd

City State Zip Code  
Fort Wayne IN 46809-2067

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

Name of Employer Wayne Township Trustee Of-ice Occupation  
Wayne Township Trustee Of-ice Attorney

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
02 / 26 / 2010

Transaction ID: C1381290

Amount of Each Receipt this Period  
250.00

250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **575.00**

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

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

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

FOR LINE NUMBER: PAGE 60 / 103  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.** Full Name (Last, First, Middle Initial)  
Edward Weber

Mailing Address 405 Bayspring Dr

City State Zip Code  
Fort Wayne IN 46814-8917

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

Name of Employer Associated Imaging      Occupation Physician

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	1	/	2	0	1	0

**Transaction ID:** C1388445

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Donald Williams

Mailing Address 4826 Oak Knob

City State Zip Code  
Fort Wayne IN 46845

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

Name of Employer None      Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	0	/	2	0	1	0

**Transaction ID:** C1524704

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Gerald Young

Mailing Address 8026 Manor Drive

City State Zip Code  
Fort Wayne IN 46825

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

Name of Employer None      Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	5	/	2	0	1	0

**Transaction ID:** C1193789

Amount of Each Receipt this Period  
250.00

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

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

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

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

FOR LINE NUMBER: PAGE 61 / 103  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

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

Mailing Address 8026 Manor Drive

City State Zip Code  
Fort Wayne IN 46825

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

Name of Employer None Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 01 / 25 / 2010  
**Transaction ID:** C1193786  
 Amount of Each Receipt this Period: 250.00

**B.** Full Name (Last, First, Middle Initial)  
T&F LLP

Mailing Address 1424 Columbia Ave

City State Zip Code  
Fort Wayne IN 46805-5217

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

Name of Employer Occupation

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 03 / 11 / 2010  
**Transaction ID:** C1397051  
 Amount of Each Receipt this Period: 350.00

PARTNERSHIP--partners below if itemized

**C.** Full Name (Last, First, Middle Initial)  
Frank Casagrande

Mailing Address 1424 Columbia Ave

City State Zip Code  
Fort Wayne IN 46805-5217

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

Name of Employer O'Sullivan's Pub Occupation Owner

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 03 / 11 / 2010  
**Transaction ID:** C1594144  
 Amount of Each Receipt this Period: 350.00

[MEMO ITEM]  
\*

**SUBTOTAL** of Receipts This Page (optional) ..... ► **600.00**

**TOTAL** This Period (last page this line number only) ..... ► **70934.96**

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

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

FOR LINE NUMBER: PAGE 62 / 103  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.** Full Name (Last, First, Middle Initial)  
Indiana Democratic Party

Mailing Address 115 West Washington Street, Ste. 1

City State Zip Code  
Indianapolis IN 46204

FEC ID number of contributing federal political committee. **C** C00108613

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2010

Transaction ID: C1537156

Amount of Each Receipt this Period  
2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	2500.00

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

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

FOR LINE NUMBER: PAGE 63 / 103  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Hoosiers for Jill Long Thompson

Mailing Address 8599 E. 18 Rd.

City Argos State IN Zip Code 46501

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 03 / 29 / 2010  
**Transaction ID: C1517821**  
 Amount of Each Receipt this Period: 500.00

**B.**

Full Name (Last, First, Middle Initial)  
United Steelworkers Political Action Fund

Mailing Address Five Gateway Center

City Pittsburgh State PA Zip Code 15222

FEC ID number of contributing federal political committee. **C** C00003590

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt: 03 / 31 / 2010  
**Transaction ID: C1537153**  
 Amount of Each Receipt this Period: 2500.00

**C.**

Full Name (Last, First, Middle Initial)  
United Steelworkers Political Action Fund

Mailing Address Five Gateway Center

City Pittsburgh State PA Zip Code 15222

FEC ID number of contributing federal political committee. **C** C00003590

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt: 03 / 31 / 2010  
**Transaction ID: C1537155**  
 Amount of Each Receipt this Period: 5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>8000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>8000.00</b>

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

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

FOR LINE NUMBER: PAGE 64 / 103  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

**A.**

Full Name (Last, First, Middle Initial) Tower Bank		Date of Receipt MM / DD / YYYY 02 / 26 / 2010
Mailing Address 116 E. Berry Street		<b>Transaction ID:</b> C1392975
City Fort Wayne	State IN	Zip Code 46802
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 70.56
Name of Employer	Occupation	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 207.66	

**B.**

Full Name (Last, First, Middle Initial) Tower Bank		Date of Receipt MM / DD / YYYY 03 / 10 / 2010
Mailing Address 116 E. Berry Street		<b>Transaction ID:</b> C1565208
City Fort Wayne	State IN	Zip Code 46802
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 137.10
Name of Employer	Occupation	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 207.66	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	207.66
<b>TOTAL</b> This Period (last page this line number only) .....	▶	207.66



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) 1100 Airport North Partnership  Mailing Address 301 Airport North Office Park  City Fort Wayne State IN Zip Code 46825  Purpose of Disbursement Rent for office & deposit Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D71450 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 3 / 2 0 1 0  Amount of Each Disbursement this Period 1200.00
<b>B.</b>	Full Name (Last, First, Middle Initial) 1100 Airport North Partnership  Mailing Address 301 Airport North Office Park  City Fort Wayne State IN Zip Code 46825  Purpose of Disbursement Rent for office Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D85838 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 1 0  Amount of Each Disbursement this Period 600.00
<b>C.</b>	Full Name (Last, First, Middle Initial) 1100 Airport North Partnership  Mailing Address 301 Airport North Office Park  City Fort Wayne State IN Zip Code 46825  Purpose of Disbursement Office rent Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D88236 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 1 0  Amount of Each Disbursement this Period 600.00

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

2400.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Comcast  Mailing Address 720 Taylor Street  City Fort Wayne State IN Zip Code 46802  Purpose of Disbursement Internet and phone service Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D88235 Date of Disbursement 03 / 23 / 2010  Amount of Each Disbursement this Period 141.66
<b>B.</b>	Full Name (Last, First, Middle Initial) Comcast  Mailing Address 720 Taylor Street  City Fort Wayne State IN Zip Code 46802  Purpose of Disbursement Internet and digital voice Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D87227 Date of Disbursement 03 / 09 / 2010  Amount of Each Disbursement this Period 194.31
<b>C.</b>	Full Name (Last, First, Middle Initial) DKM Sportswear  Mailing Address 3203 Caprice Court  City Fort Wayne State IN Zip Code 46808  Purpose of Disbursement T-shirts Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D69504 Date of Disbursement 01 / 27 / 2010  Amount of Each Disbursement this Period 791.42

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

1127.39

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) DKM Sportswear</p> <p>Mailing Address 3203 Caprice Court</p> <p>City Fort Wayne State IN Zip Code 46808</p> <p>Purpose of Disbursement T-shirts</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D67722</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="820.00"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Lincoln Printing</p> <p>Mailing Address 3310 Congressional Parkway</p> <p>City Fort Wayne State IN Zip Code 46808</p> <p>Purpose of Disbursement Envelopes, Bus. cards, letterhead</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D62878</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1133.13"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) NGP Software</p> <p>Mailing Address 1225 Eye Street NW, Ste. 1225</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Quarterly campaign office online service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D85837</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1650.00"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="3603.13"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

A.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: D86915 Date of Disbursement 03 / 05 / 2010
	Mailing Address 2211 North First Street	Amount of Each Disbursement this Period 6.10
	City San Jose State CA Zip Code 95131	
	Purpose of Disbursement Transaction fee Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: D88233 Date of Disbursement 03 / 23 / 2010
	Mailing Address 2211 North First Street	Amount of Each Disbursement this Period 3.20
	City San Jose State CA Zip Code 95131	
	Purpose of Disbursement Transaction fee Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: D88234 Date of Disbursement 03 / 23 / 2010
	Mailing Address 2211 North First Street	Amount of Each Disbursement this Period 6.10
	City San Jose State CA Zip Code 95131	
	Purpose of Disbursement Transaction fee Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	15.40
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 2211 North First Street</p> <p>City San Jose State CA Zip Code 95131</p> <p>Purpose of Disbursement Transaction fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D90003</p> <p>Date of Disbursement 03 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 25.20</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 2211 North First Street</p> <p>City San Jose State CA Zip Code 95131</p> <p>Purpose of Disbursement Transaction fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D90004</p> <p>Date of Disbursement 03 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 11.35</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 2211 North First Street</p> <p>City San Jose State CA Zip Code 95131</p> <p>Purpose of Disbursement Transaction fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D90005</p> <p>Date of Disbursement 03 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 5.68</p>

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

42.23

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 2211 North First Street</p> <p>City San Jose State CA Zip Code 95131</p> <p>Purpose of Disbursement Transaction fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D90006</p> <p>Date of Disbursement 03 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 158.25</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 2211 North First Street</p> <p>City San Jose State CA Zip Code 95131</p> <p>Purpose of Disbursement Transaction fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D90007</p> <p>Date of Disbursement 03 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 138.90</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 2211 North First Street</p> <p>City San Jose State CA Zip Code 95131</p> <p>Purpose of Disbursement Transaction fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D90008</p> <p>Date of Disbursement 03 / 31 / 2010</p> <p>Amount of Each Disbursement this Period 63.05</p>

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

360.20

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 2211 North First Street</p> <p>City San Jose State CA Zip Code 95131</p> <p>Purpose of Disbursement Transaction fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D68126</p> <p>Date of Disbursement 01 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 14.80</p> <p>Category/Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 2211 North First Street</p> <p>City San Jose State CA Zip Code 95131</p> <p>Purpose of Disbursement Transaction fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D86057</p> <p>Date of Disbursement 02 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 1.75</p> <p>Category/Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 2211 North First Street</p> <p>City San Jose State CA Zip Code 95131</p> <p>Purpose of Disbursement Transaction fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D86476</p> <p>Date of Disbursement 03 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 1.75</p> <p>Category/Type</p>

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

18.30

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

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

A.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: D86691 Date of Disbursement MM / DD / YYYY 03 / 04 / 2010
	Mailing Address 2211 North First Street	Amount of Each Disbursement this Period 11.90
	City San Jose State CA Zip Code 95131	
	Purpose of Disbursement Transaction fee Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: D86692 Date of Disbursement MM / DD / YYYY 03 / 04 / 2010
	Mailing Address 2211 North First Street	Amount of Each Disbursement this Period 14.80
	City San Jose State CA Zip Code 95131	
	Purpose of Disbursement Transaction fee Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Paypal	Transaction ID: D86693 Date of Disbursement MM / DD / YYYY 03 / 04 / 2010
	Mailing Address 2211 North First Street	Amount of Each Disbursement this Period 29.30
	City San Jose State CA Zip Code 95131	
	Purpose of Disbursement Transaction fee Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>56.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 2211 North First Street</p> <p>City San Jose State CA Zip Code 95131</p> <p>Purpose of Disbursement Transaction fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D87800</p> <p>Date of Disbursement MM / DD / YYYY 03 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 7.55</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 2211 North First Street</p> <p>City San Jose State CA Zip Code 95131</p> <p>Purpose of Disbursement Transaction fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D87801</p> <p>Date of Disbursement MM / DD / YYYY 03 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 14.80</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 2211 North First Street</p> <p>City San Jose State CA Zip Code 95131</p> <p>Purpose of Disbursement Transaction fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D88028</p> <p>Date of Disbursement MM / DD / YYYY 03 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 44.40</p>

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

66.75

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Chris Ruckman</p> <p>Mailing Address 331 West Washington Blvd.</p> <p>City Fort Wayne State IN Zip Code 46802</p> <p>Purpose of Disbursement Financial services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D67721</p> <p>Date of Disbursement 01 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 508.33</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Chris Ruckman</p> <p>Mailing Address 331 West Washington Blvd.</p> <p>City Fort Wayne State IN Zip Code 46802</p> <p>Purpose of Disbursement Financial services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D86471</p> <p>Date of Disbursement 03 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 462.50</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Garrett Webb</p> <p>Mailing Address PO Box 2036</p> <p>City Michigan City State IN Zip Code 46361</p> <p>Purpose of Disbursement Field work</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D88245</p> <p>Date of Disbursement 03 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 345.00</p>

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

1315.83

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Garrett Webb  Mailing Address PO Box 2036  City Michigan City State IN Zip Code 46361  Purpose of Disbursement Cell phone allowance Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: District:	Transaction ID: D88242 Date of Disbursement 03 / 23 / 2010  Amount of Each Disbursement this Period 60.00  Category/Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Garrett Webb  Mailing Address PO Box 2036  City Michigan City State IN Zip Code 46361  Purpose of Disbursement Cell phone allowance Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: District:	Transaction ID: D66224 Date of Disbursement 01 / 14 / 2010  Amount of Each Disbursement this Period 60.00  Category/Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Garrett Webb  Mailing Address PO Box 2036  City Michigan City State IN Zip Code 46361  Purpose of Disbursement Cell phone allowance Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: District:	Transaction ID: D86054 Date of Disbursement 02 / 25 / 2010  Amount of Each Disbursement this Period 60.00  Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	180.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Adam Yost</p> <p>Mailing Address 1417 Rolling Grove Ct</p> <p>City Naperville State IL Zip Code 60540-6355</p> <p>Purpose of Disbursement Finance services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D86914</p> <p>Date of Disbursement 03 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 408.33</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Judith Rowe</p> <p>Mailing Address 311 South Superior Street</p> <p>City Angola State IN Zip Code 46703</p> <p>Purpose of Disbursement Banners</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D62876</p> <p>Date of Disbursement 01 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 308.16</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) J. Rowe Signs and Promotions</p> <p>Mailing Address 1401 N. Wayne Street Ste. 2</p> <p>City Angola State IN Zip Code 46703</p> <p>Purpose of Disbursement Banners</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D97910</p> <p>Date of Disbursement 01 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 308.16</p> <p><b>[MEMO ITEM]</b></p>

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

716.49

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

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Garrett Webb  Mailing Address PO Box 2036  City Michigan City State IN Zip Code 46361  Purpose of Disbursement Reimburse gas & food Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D66225 Date of Disbursement 01 / 14 / 2010  Amount of Each Disbursement this Period 154.18
<b>B.</b>	Full Name (Last, First, Middle Initial) Chris Ruckman  Mailing Address 331 West Washington Blvd.  City Fort Wayne State IN Zip Code 46802  Purpose of Disbursement Reimburse stamps Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D67720 Date of Disbursement 01 / 19 / 2010  Amount of Each Disbursement this Period 8.80
<b>C.</b>	Full Name (Last, First, Middle Initial) Indiana Democratic Party  Mailing Address 115 West Washington Street, Ste. 1  City Indianapolis State IN Zip Code 46204  Purpose of Disbursement Jan. & Feb. staff payroll Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D71449 Date of Disbursement 02 / 03 / 2010  Amount of Each Disbursement this Period 11536.42

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

11699.40

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

A. Form/Schedule : **SB17**  
Transaction ID : **D66225**

Vendor paid < \$200 in cycle

B. Form/Schedule : **SB17**  
Transaction ID : **D67720**

Vendor paid < \$200 in cycle

C. Form/Schedule : **SB17**

\$60 of total was paid to vendor who received < 200 in cycle

Transaction ID : **D71449**

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Indiana Democratic Party</p> <p>Mailing Address 115 West Washington Street, Ste. 1</p> <p>City Indianapolis State IN Zip Code 46204</p> <p>Purpose of Disbursement Federal, state &amp; local payroll taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D98143</p> <p>Date of Disbursement 02 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 1076.42</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Jason Kingsbury</p> <p>Mailing Address 5119 Truemper Way #4</p> <p>City Fort Wayne State IN Zip Code 46825</p> <p>Purpose of Disbursement Jan. &amp; Feb. salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D97976</p> <p>Date of Disbursement 02 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 5400.00</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Patrick McAlister</p> <p>Mailing Address 712 Oak Tree Court</p> <p>City Fort Wayne State IN Zip Code 46845</p> <p>Purpose of Disbursement Jan. &amp; Feb. salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D97977</p> <p>Date of Disbursement 02 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p><b>[MEMO ITEM]</b></p>

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

0.00

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



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

A.	Full Name (Last, First, Middle Initial) Garrett Webb  Mailing Address PO Box 2036  City Michigan City State IN Zip Code 46361  Purpose of Disbursement Reimburse stamps Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D71727 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 1 0  Amount of Each Disbursement this Period 8.80
B.	Full Name (Last, First, Middle Initial) Garrett Webb  Mailing Address PO Box 2036  City Michigan City State IN Zip Code 46361  Purpose of Disbursement Reimburse gas & food Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D71728 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 1 0  Amount of Each Disbursement this Period 249.74
C.	Full Name (Last, First, Middle Initial) Garrett Webb  Mailing Address PO Box 2036  City Michigan City State IN Zip Code 46361  Purpose of Disbursement Reimburse gas & food Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D86055 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 1 0  Amount of Each Disbursement this Period 202.97

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>461.51</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

A. Form/Schedule : **SB17**  
Transaction ID : **D71727**

Vendor paid < \$200 in cycle

B. Form/Schedule : **SB17**  
Transaction ID : **D71728**

Vendor paid < \$200 in cycle

C. Form/Schedule : **SB17**

Vendor paid < \$200 in cycle

Transaction ID : **D86055**

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Chris Ruckman</p> <p>Mailing Address 331 West Washington Blvd.</p> <p>City Fort Wayne State IN Zip Code 46802</p> <p>Purpose of Disbursement Reimburse ink cartridge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D86470</p> <p>Date of Disbursement MM / DD / YYYY 03 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 38.51</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Jason Kingsbury</p> <p>Mailing Address 5119 Truemper Way #4</p> <p>City Fort Wayne State IN Zip Code 46825</p> <p>Purpose of Disbursement Gas reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D86585</p> <p>Date of Disbursement MM / DD / YYYY 03 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 77.10</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Jason Kingsbury</p> <p>Mailing Address 5119 Truemper Way #4</p> <p>City Fort Wayne State IN Zip Code 46825</p> <p>Purpose of Disbursement Stamp reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D86606</p> <p>Date of Disbursement MM / DD / YYYY 03 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 17.60</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	133.21
<b>TOTAL</b> This Period (last page this line number only) .....	

A. Form/Schedule : **SB17**  
Transaction ID : **D86470**

Vendor paid < \$200 in cycle

B. Form/Schedule : **SB17**  
Transaction ID : **D86585**

Vendor paid < \$200 in cycle

C. Form/Schedule : **SB17**

Vendor paid < \$200 in cycle

Transaction ID : **D86606**

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

A.	Full Name (Last, First, Middle Initial) Jason Kingsbury	Transaction ID: D86607 Date of Disbursement MM / DD / YYYY 03 / 02 / 2010
	Mailing Address 5119 Truemper Way #4	Amount of Each Disbursement this Period 7.19
	City Fort Wayne State IN Zip Code 46825	
	Purpose of Disbursement Reimburse office supplies	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Jason Kingsbury	Transaction ID: D86615 Date of Disbursement MM / DD / YYYY 03 / 02 / 2010
	Mailing Address 5119 Truemper Way #4	Amount of Each Disbursement this Period 32.10
	City Fort Wayne State IN Zip Code 46825	
	Purpose of Disbursement Reimburse printer for office	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Jason Kingsbury	Transaction ID: D86616 Date of Disbursement MM / DD / YYYY 03 / 02 / 2010
	Mailing Address 5119 Truemper Way #4	Amount of Each Disbursement this Period 49.04
	City Fort Wayne State IN Zip Code 46825	
	Purpose of Disbursement Reimburse router & phone for office	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>88.33</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

A. Form/Schedule : **SB17**  
Transaction ID : **D86607**

Vendor paid < \$200 in cycle

B. Form/Schedule : **SB17**  
Transaction ID : **D86615**

Vendor paid < \$200 in cycle



C. Form/Schedule : **SB17**

Vendor paid < \$200 in cycle

Transaction ID : **D86616**

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

A.

Full Name (Last, First, Middle Initial)  
Indiana Democratic Party

Transaction ID: D86698  
Date of Disbursement

Mailing Address 115 West Washington Street, Ste. 1

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	1	0

City Indianapolis State IN Zip Code 46204

Amount of Each Disbursement this Period

11676.78
----------

Purpose of Disbursement  
Mar. staff payroll

Category/ Type
-------------------

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Indiana Democratic Party

Transaction ID: D98142  
Date of Disbursement

Mailing Address 115 West Washington Street, Ste. 1

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	1	0

City Indianapolis State IN Zip Code 46204

Amount of Each Disbursement this Period

1086.78
---------

Purpose of Disbursement  
Federal, state & local payroll taxes

Category/ Type
-------------------

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
Jason Kingsbury

Transaction ID: D98083  
Date of Disbursement

Mailing Address 5119 Truemper Way #4

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	1	0

City Fort Wayne State IN Zip Code 46825

Amount of Each Disbursement this Period

4500.00
---------

Purpose of Disbursement  
March salary

Category/ Type
-------------------

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

[MEMO ITEM]

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

11676.78
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TOTAL This Period (last page this line number only) .....

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A. Form/Schedule : **SB17**

\$90 of total was paid to vendor who received < \$200 in cycle

Transaction ID : **D86698**

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Patrick McAlister  Mailing Address 712 Oak Tree Court  City Fort Wayne State IN Zip Code 46845  Purpose of Disbursement March salary Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D98085 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 4 / 2 0 1 0	Amount of Each Disbursement this Period 2500.00  <b>[MEMO ITEM]</b>
<b>B.</b>	Full Name (Last, First, Middle Initial) Adam Yost  Mailing Address 1417 Rolling Grove Ct  City Naperville State IL Zip Code 60540-6355  Purpose of Disbursement March salary Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D98084 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 4 / 2 0 1 0	Amount of Each Disbursement this Period 3500.00  <b>[MEMO ITEM]</b>
<b>C.</b>	Full Name (Last, First, Middle Initial) Jason Kingsbury  Mailing Address 5119 Truemper Way #4  City Fort Wayne State IN Zip Code 46825  Purpose of Disbursement Reimburse lunch Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D86720 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 1 0	Amount of Each Disbursement this Period 7.65

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7.65
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

C. Form/Schedule : **SB17**

Vendor paid < \$200 in cycle

Transaction ID : **D86720**

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

A.	Full Name (Last, First, Middle Initial) Indiana Democratic Party	Transaction ID: D86910 Date of Disbursement 03 / 05 / 2010
	Mailing Address 115 West Washington Street, Ste. 1	Amount of Each Disbursement this Period 1213.84
	City Indianapolis State IN Zip Code 46204	
	Purpose of Disbursement Feb. & Mar. housing allowance for staff	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Indiana Democratic Party	Transaction ID: D98140 Date of Disbursement 03 / 05 / 2010
	Mailing Address 115 West Washington Street, Ste. 1	Amount of Each Disbursement this Period 113.84
	City Indianapolis State IN Zip Code 46204	
	Purpose of Disbursement Federal, state & local payroll taxes	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Jason Kingsbury	Transaction ID: D98087 Date of Disbursement 03 / 05 / 2010
	Mailing Address 5119 Truemper Way #4	Amount of Each Disbursement this Period 1100.00
	City Fort Wayne State IN Zip Code 46825	
	Purpose of Disbursement Feb. & Mar. housing allowance	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1213.84
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Garrett Webb</p> <p>Mailing Address PO Box 2036</p> <p>City Michigan City State IN Zip Code 46361</p> <p>Purpose of Disbursement Reimburse office supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D87541</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="16.49"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Garrett Webb</p> <p>Mailing Address PO Box 2036</p> <p>City Michigan City State IN Zip Code 46361</p> <p>Purpose of Disbursement Reimburse gas &amp; food</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D87542</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="201.17"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Jason Kingsbury</p> <p>Mailing Address 5119 Truemper Way #4</p> <p>City Fort Wayne State IN Zip Code 46825</p> <p>Purpose of Disbursement Cell phone reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D88228</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="69.99"/></p>

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

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

A. Form/Schedule : **SB17**  
Transaction ID : **D87541**

Vendor paid < \$200 in cycle

B. Form/Schedule : **SB17**  
Transaction ID : **D87542**

Vendor paid < \$200 in cycle



C. Form/Schedule : **SB17**

Vendor paid < \$200 in cycle

Transaction ID : **D88228**

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

A.	Full Name (Last, First, Middle Initial) Jason Kingsbury	Transaction ID: D88229
	Mailing Address 5119 Truemper Way #4	Date of Disbursement MM / DD / YYYY 03 / 23 / 2010
	City Fort Wayne State IN Zip Code 46825	Amount of Each Disbursement this Period 35.35
	Purpose of Disbursement Gas reimbursement	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Jason Kingsbury	Transaction ID: D88230
	Mailing Address 5119 Truemper Way #4	Date of Disbursement MM / DD / YYYY 03 / 23 / 2010
	City Fort Wayne State IN Zip Code 46825	Amount of Each Disbursement this Period 6.40
	Purpose of Disbursement Reimburse sodas for office	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Jason Kingsbury	Transaction ID: D88231
	Mailing Address 5119 Truemper Way #4	Date of Disbursement MM / DD / YYYY 03 / 23 / 2010
	City Fort Wayne State IN Zip Code 46825	Amount of Each Disbursement this Period 19.22
	Purpose of Disbursement Printer ink reimbursement	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	60.97
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

A. Form/Schedule : **SB17**  
Transaction ID : **D88229**

Vendor paid < \$200 in cycle

B. Form/Schedule : **SB17**  
Transaction ID : **D88230**

Vendor paid < \$200 in cycle

C. Form/Schedule : **SB17**

Vendor paid < \$200 in cycle

Transaction ID : **D88231**

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Tom Hayhurst for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Jason Kingsbury</p> <p>Mailing Address 5119 Truemper Way #4</p> <p>City Fort Wayne State IN Zip Code 46825</p> <p>Purpose of Disbursement Reimburse office supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D88232</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="30.68"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Garrett Webb</p> <p>Mailing Address PO Box 2036</p> <p>City Michigan City State IN Zip Code 46361</p> <p>Purpose of Disbursement Reimburse gas &amp; food</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D88243</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="172.47"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Garrett Webb</p> <p>Mailing Address PO Box 2036</p> <p>City Michigan City State IN Zip Code 46361</p> <p>Purpose of Disbursement Office equipment reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D88244</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="23.73"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="226.88"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="35757.94"/>

A. Form/Schedule : **SB17**  
Transaction ID : **D88232**

Vendor paid < \$200 in cycle

B. Form/Schedule : **SB17**  
Transaction ID : **D88243**

Vendor paid < \$200 in cycle

C. Form/Schedule : **SB17**

Vendor paid < \$200 in cycle

Transaction ID : **D88244**