

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines.

12FE4M5

Hoosiers Supporting Buyer For Congress

ADDRESS (number and street) 103 West Broadway St, P.O. Box 712

Check if different than previously reported. (ACC)

Monticello

IN

47960

2. **FEC IDENTIFICATION NUMBER** ▼

C C00255471

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

IN

04

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12S)

Election on MM / DD / YYYY in the State of

(c) 30-Day **POST**-Election Report for the:

- General (30G) Runoff (30R) Special (30S)

Election on MM / DD / YYYY in the State of

5. Covering Period

MM / DD / YYYY 04 / 01 / 2012

through

MM / DD / YYYY 06 / 30 / 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Stephanie Mattix

Signature of Treasurer Stephanie Mattix

[Electronically Filed]

Date

MM / DD / YYYY 07 / 19 / 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only								
-----------------	--	--	--	--	--	--	--	--

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Hoosiers Supporting Buyer For Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	0.00	0.00
(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)).....	0.00	0.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	5249.29	91379.78
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	3594.18
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	5249.29	87785.60
8. Cash on Hand at Close of Reporting Period (from Line 27).....	66481.89	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

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

Hoosiers Supporting Buyer For Congress

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

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		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized.....	0.00	0.00
(iii) TOTAL of contributions from individuals ▶	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0.00	0.00
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	3594.18
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	26134.26
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	0.00	29728.44

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	5249.29	91379.78
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	25000.00	49200.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	30249.29	140579.78

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	96731.18
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	0.00
25. SUBTOTAL (add Line 23 and Line 24).....	96731.18
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	30249.29
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	66481.89

**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)	PAGE 5 OF 15			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 20d	<input type="checkbox"/> 19c 21

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

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

Full Name (Last, First, Middle Initial) A. Century Link		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2012
Mailing Address P.O. Box 74517		Amount of Each Disbursement this Period 256.36
City Atlanta	State GA	
Zip Code 30374-	Purpose of Disbursement phone expense	PHONE EXPENSE
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Century Link		Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2012
Mailing Address P.O. Box 74517		Amount of Each Disbursement this Period 548.91
City Atlanta	State GA	
Zip Code 30374-	Purpose of Disbursement phone expense	PHONE EXPENSE
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Century Link		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2012
Mailing Address P.O. Box 74517		Amount of Each Disbursement this Period 256.36
City Atlanta	State GA	
Zip Code 30374-	Purpose of Disbursement phone expense	PHONE EXPENSE
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1061.63
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)		PAGE 6 OF 15	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

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

Full Name (Last, First, Middle Initial) A. Comcast		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2012
Mailing Address		Amount of Each Disbursement this Period 87.19
City Monticello	State IN	
Zip Code 47960-	Purpose of Disbursement Cabel service	Transaction ID : 20719.E9634
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CABEL SERVICE
State: District:		

Full Name (Last, First, Middle Initial) B. Cal Johnson		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2012
Mailing Address P.O. Box 671		Amount of Each Disbursement this Period 850.00
City Folly Beach	State SC	
Zip Code 29439-	Purpose of Disbursement office rent	Transaction ID : 20719.E9613
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	OFFICE RENT
State: District:		

Full Name (Last, First, Middle Initial) c. Cal Johnson		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2012
Mailing Address P.O. Box 671		Amount of Each Disbursement this Period 850.00
City Folly Beach	State SC	
Zip Code 29439-	Purpose of Disbursement office rent	Transaction ID : 20719.E9636
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	OFFICE RENT
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1787.19
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)	PAGE 7 OF 15			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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

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

Full Name (Last, First, Middle Initial) A. Cal Johnson			Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2012		
Mailing Address P.O. Box 671			Amount of Each Disbursement this Period 850.00		
City Folly Beach	State SC	Zip Code 29439-	Transaction ID : 20719.E9628		
Purpose of Disbursement office rent		Category/ Type	OFFICE RENT		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. Stephanie Mattix			Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2012		
Mailing Address 200 N. Main St.			Amount of Each Disbursement this Period 323.23		
City Monticello	State IN	Zip Code 47960-	Transaction ID : 20719.E9612		
Purpose of Disbursement payroll		Category/ Type	PAYROLL		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) c. Stephanie Mattix			Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2012		
Mailing Address 200 N. Main St.			Amount of Each Disbursement this Period 323.23		
City Monticello	State IN	Zip Code 47960-	Transaction ID : 20719.E9622		
Purpose of Disbursement payroll		Category/ Type	PAYROLL		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	1496.46
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)	PAGE 8 OF 15			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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

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

Full Name (Last, First, Middle Initial) A. Stephanie Mattix		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2012
Mailing Address 200 N. Main St.		Amount of Each Disbursement this Period 277.18
City Monticello	State IN	
Zip Code 47960-	Purpose of Disbursement Reimbursement for office supplies	Transaction ID : 20719.E9633
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	REIMBURSEMENT FOR OFFICE SUPPLIES
State: District:		

Full Name (Last, First, Middle Initial) B. Stephanie Mattix		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2012
Mailing Address 200 N. Main St.		Amount of Each Disbursement this Period 323.23
City Monticello	State IN	
Zip Code 47960-	Purpose of Disbursement payroll	Transaction ID : 20719.E9635
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	PAYROLL
State: District:		

Full Name (Last, First, Middle Initial) c. Monticello Water & Sewer Departments		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2012
Mailing Address P.O. Box 384		Amount of Each Disbursement this Period 40.97
City Monticello	State IN	
Zip Code 47960-	Purpose of Disbursement water bill	Transaction ID : 20719.E9618
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	WATER BILL
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	641.38
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)		PAGE 9 OF 15	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

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

Full Name (Last, First, Middle Initial) A. Monticello Water & Sewer Departments		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2012
Mailing Address P.O. Box 384		Amount of Each Disbursement this Period 37.06
City Monticello	State IN	
Zip Code 47960-	Purpose of Disbursement water bill	Transaction ID : 20719.E9624
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	WATER BILL
State: District:		

Full Name (Last, First, Middle Initial) B. United States Treasury		Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2012
Mailing Address		Amount of Each Disbursement this Period 46.54
City	State	
Zip Code	Purpose of Disbursement payroll taxes	Transaction ID : 20719.E9620
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	PAYROLL TAXES
State: District:		

Full Name (Last, First, Middle Initial) c. United States Treasury		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2012
Mailing Address		Amount of Each Disbursement this Period 6.30
City	State	
Zip Code	Purpose of Disbursement payroll taxes	Transaction ID : 20719.E9615
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	PAYROLL TAXES
State: District:		

SUBTOTAL of Disbursements This Page (optional)	89.90
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 OF 15	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

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

Full Name (Last, First, Middle Initial) A. United States Treasury		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2012
Mailing Address		Amount of Each Disbursement this Period 21.03
City	State Zip Code	
Purpose of Disbursement payroll taxes	Category/ Type	Transaction ID : 20719.E9616
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	PAYROLL TAXES
State: District:		

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2012
Mailing Address P.O. Box 630024		Amount of Each Disbursement this Period 118.03
City	State Zip Code Lafayette IN 47901-	
Purpose of Disbursement Cell phone Expense	Category/ Type	Transaction ID : 20719.E9632
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CELL PHONE EXPENSE
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	139.06
TOTAL This Period (last page this line number only).....	5215.62

**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)	PAGE 11 OF 15			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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

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

Full Name (Last, First, Middle Initial) A. Buck McKeon for Congress		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2012
Mailing Address 23942 Lyons Ave. #105		Amount of Each Disbursement this Period 2000.00 Transaction ID : 20719.E9610
City Santa Clarita State CA Zip Code 91321-	Purpose of Disbursement CONTRIBUTION	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Duncan Hunter for Congress		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2012
Mailing Address 9340 Fuerte Drive Suite 302		Amount of Each Disbursement this Period 1000.00 Transaction ID : 20719.E9631
City La Mesa State CA Zip Code 91941-	Purpose of Disbursement CONTRIBUTION	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Friends of Roy Blunt		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2012
Mailing Address PO Box 410182		Amount of Each Disbursement this Period 1500.00 Transaction ID : 20719.E9608
City Kansas City State MO Zip Code 64141-	Purpose of Disbursement CONTRIBUTION	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4500.00
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)	PAGE 12 OF 15
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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

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

Full Name (Last, First, Middle Initial) A. Hal Rogers for Congress		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2012
Mailing Address PO Box 1214		Amount of Each Disbursement this Period 1000.00 Transaction ID : 20719.E9629
City Somerset	State KY	
Zip Code 42502-	Purpose of Disbursement CONTRIBUTION	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Joe Wilson for Congress		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2012
Mailing Address PO Box 2145		Amount of Each Disbursement this Period 1500.00 Transaction ID : 20719.E9627
City West Columbia	State SC	
Zip Code 29171-	Purpose of Disbursement CONTRIBUTION	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Lee Terry for Congress		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2012
Mailing Address P.O. Box 540098		Amount of Each Disbursement this Period 1000.00 Transaction ID : 20719.E9606
City Omaha	State NE	
Zip Code 68144-	Purpose of Disbursement CONTRIBUTION	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3500.00
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)	PAGE 13 OF 15			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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

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

Full Name (Last, First, Middle Initial) A. Mary Bono For Congress		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2012
Mailing Address P.O. Box 3370		Amount of Each Disbursement this Period 2000.00 Transaction ID : 20719.E9626
City Palm Springs	State CA	
Zip Code 92264-	Purpose of Disbursement CONTRIBUTION	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Mike Pence for Governor		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2012
Mailing Address PO Box 408		Amount of Each Disbursement this Period 5000.00 Transaction ID : 20719.E9625
City Anderson	State IN	
Zip Code 46015-	Purpose of Disbursement CONTRIBUTION	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Quayle for Congress		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2012
Mailing Address 10645 North Tatum Blvd. 200-429		Amount of Each Disbursement this Period 2000.00 Transaction ID : 20719.E9609
City Phoenix	State AZ	
Zip Code 85028-	Purpose of Disbursement CONTRIBUTION	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	9000.00
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)	PAGE 14 OF 15
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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

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

Full Name (Last, First, Middle Initial) A. Richard Hudson for Congress		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2012
Mailing Address 86 Spring Street NW		Amount of Each Disbursement this Period 1000.00 Transaction ID : 20719.E9607
City Concord	State NC	
Zip Code 28025-	Purpose of Disbursement CONTRIBUTION	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. The Mayfield Campaign		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2012
Mailing Address 50 South Madison Street		Amount of Each Disbursement this Period 1000.00 Transaction ID : 20719.E9604
City Mooresville	State IN	
Zip Code 46158-	Purpose of Disbursement CONTRIBUTION	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Tim Murphy for Congress		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2012
Mailing Address PO Box 24551		Amount of Each Disbursement this Period 2000.00 Transaction ID : 20719.E9605
City Pittsburgh	State PA	
Zip Code 15234-	Purpose of Disbursement CONTRIBUTION	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4000.00
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)		PAGE 15 OF 15	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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

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

Full Name (Last, First, Middle Initial) A. Tim Scott for Congress		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2012
Mailing Address 1405 Ashley River Road		Amount of Each Disbursement this Period 2000.00 Transaction ID : 20719.E9630
City Charleston	State SC Zip Code 29407-	
Purpose of Disbursement CONTRIBUTION	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. Upton for All of US		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2012
Mailing Address 104 Hune Ave.		Amount of Each Disbursement this Period 2000.00 Transaction ID : 20719.E9617
City Alexandria	State VA Zip Code 22301-	
Purpose of Disbursement CONTRIBUTION	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4000.00
TOTAL This Period (last page this line number only).....	25000.00