

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

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

2. **FEC IDENTIFICATION NUMBER** C00255471
CITY STATE ZIP CODE STATE DISTRICT
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 11 04 2008 in the State of IN
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on in the State of

5. Covering Period 10 01 2008 through 10 15 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Douglas E. Raderstorf

Signature of Treasurer Electronically Filed by Douglas E. Raderstorf Date 10 23 2008

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Hoosiers Supporting Buyer For Congress

Report Covering the Period:

From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	8

To:

M	M
1	0

D	D
1	5

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	66184.00	816551.07
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	66184.00	816051.07
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	55890.29	425033.74
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	415.24
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	55890.29	424618.50
8. Cash on Hand at Close of Reporting Period (from Line 27).....	816625.00	
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).....	13185.00	

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:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	0

D	D
1	5

Y	Y	Y	Y
2	0	0	8

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

39900.00

234138.85

(ii) Unitemized.....

3234.00

37062.07

(iii) TOTAL of contributions

43134.00

271200.92

from individuals..... ▶

50.00

8935.42

(b) Political Party Committees.....

23000.00

536414.73

(c) Other Political Committees (such as PACS).....

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS

(other than loans)

66184.00

816551.07

(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

415.24

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

6.46

10306.36

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

66190.46

827272.67

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	55890.29	425033.74
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	500.00
(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	500.00
21. OTHER DISBURSEMENTS.....	0.00	12300.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	55890.29	437833.74

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	806324.83
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	66190.46
25. SUBTOTAL (add Line 23 and Line 24).....	872515.29
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	55890.29
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	816625.00

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

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

FOR LINE NUMBER: PAGE 5 / 54
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

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

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

Mailing Address 1111 14th St., NW
Suite 1100

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 8500.00

Date of Receipt 10 / 15 / 2008
Transaction ID: 81023.C17675
 Amount of Each Receipt this Period 5000.00

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

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

Mailing Address 2300 Wilson Blvd.
Suite 400

City Arlington State VA Zip Code 22201

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 10 / 15 / 2008
Transaction ID: 81023.C17670
 Amount of Each Receipt this Period 1000.00

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

C. Full Name (Last, First, Middle Initial)
Barnes & Thornburg PAC

Mailing Address 11 S. Meridian Street

City Indianapolis State IN Zip Code 46204

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 10 / 15 / 2008
Transaction ID: 81023.C17668
 Amount of Each Receipt this Period 1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **7000.00**

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

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

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

FOR LINE NUMBER: PAGE 6 / 54
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

A. Full Name (Last, First, Middle Initial)
CH2M Hill Companies Inc. PAC

Mailing Address 9191 South Jamaica Street

City State Zip Code
Englewood CO 80112

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: 81023.C17600

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 1776 I Street NW Suite 700

City State Zip Code
Washington DC 20006

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: 81023.C17590

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 2000 Second Ave.

City State Zip Code
Detroit MI 48226

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

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

Transaction ID: 81023.C17591

Amount of Each Receipt this Period
1000.00

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

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

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

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

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

FOR LINE NUMBER: PAGE 7 / 54
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

A. Full Name (Last, First, Middle Initial)
Florida Power & Light Employees PAC

Mailing Address 801 Pennsylvania Ave. NW
Suite 220

City Washington State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 10 / 13 / 2008
Transaction ID: 81023.C17601
 Amount of Each Receipt this Period 1000.00

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

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

Mailing Address 10332 Main Street

City Fairfax State VA Zip Code 22030

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt 10 / 15 / 2008
Transaction ID: 81023.C17676
 Amount of Each Receipt this Period 1500.00

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

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

Mailing Address 1299 Pennsylvania Ave., NW
Suite 1100W

City Washington State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt 10 / 15 / 2008
Transaction ID: 81023.C17678
 Amount of Each Receipt this Period 2000.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 54
(check only one)

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

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

A. Full Name (Last, First, Middle Initial)
Indiana Chamber of Commerce

Mailing Address 115 W. Washington Street
Suite 850S

City Indianapolis State IN Zip Code 46204

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 10 / 15 / 2008
Transaction ID: 81023.C17609
Amount of Each Receipt this Period 1000.00

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

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

Mailing Address 591 Redwood Hwy
Bldg #4000

City Mill Valley State CA Zip Code 94941

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt 10 / 15 / 2008
Transaction ID: 81023.C17679
Amount of Each Receipt this Period 2500.00

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

C. Full Name (Last, First, Middle Initial)
Roche Diagnostics

Mailing Address 1425 K Street
Suite 650

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt 10 / 15 / 2008
Transaction ID: 81023.C17665
Amount of Each Receipt this Period 1000.00

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

SUBTOTAL of Receipts This Page (optional) ► 4500.00

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

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

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

FOR LINE NUMBER: PAGE 9 / 54
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

A. Full Name (Last, First, Middle Initial)
Unisys Corp. Employees PAC

Mailing Address MS B214 One Unisys Way

City State Zip Code
Blue Bell PA 19424

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

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

Transaction ID: 81023.C17589

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Veterans of Foreign War PAC

Mailing Address 200 Maryland Ave. NE Suite 308

City State Zip Code
Washington DC 20002

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

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

Transaction ID: 81023.C17677

Amount of Each Receipt this Period
2000.00

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

C. Full Name (Last, First, Middle Initial)
Wyeth Good Government Fund

Mailing Address Five Giralda Farms

City State Zip Code
Madison NJ 07940

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: 81023.C17588

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► 4000.00

TOTAL This Period (last page this line number only) ► 23000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 54

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Devin Anderson

Mailing Address 10078 Summerlakes Drive

City State Zip Code
Carmel IN 46032

FEC ID number of contributing federal political committee. C

Name of Employer
E&A industries

Occupation
Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 15 / 2008

Transaction ID: 81023.C17666

Amount of Each Receipt this Period
1000.00

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

B.

Full Name (Last, First, Middle Initial)
Alex Azar II

Mailing Address 7430 North Washington Blvd.

City State Zip Code
Indianapolis IN 46240

FEC ID number of contributing federal political committee. C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 15 / 2008

Transaction ID: 81023.C17652

Amount of Each Receipt this Period
500.00

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

C.

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

Mailing Address 1609 Hazelwood Court West

City State Zip Code
Greenwood IN 46143

FEC ID number of contributing federal political committee. C

Name of Employer
Pearl Street Venture Funds

Occupation
Information Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 15 / 2008

Transaction ID: 81023.C17653

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) 2000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

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

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

A. Full Name (Last, First, Middle Initial)
Al Bennett

Mailing Address 3320 Vestal Road

City State Zip Code
Plainfield IN 46168

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

Name of Employer self Occupation
Consultant

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

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Jay Bonitt

Mailing Address 1200 Villamy Blvd.

City State Zip Code
Alexandria VA 22307

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

Name of Employer Eli Lilly & Company Occupation
Govt Affairs

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

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 1612 North River Rd.

City State Zip Code
West Lafayette IN 47906

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

Name of Employer Purdue University Occupation
Professor

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

Amount of Each Receipt this Period
250.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 54

(check only one)

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

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

A.

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

Mailing Address 5215 South 400 East

City State Zip Code
Clayton IN 46118

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 07 / 2008

Transaction ID: 81010.C17431

Amount of Each Receipt this Period
200.00

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

B.

Full Name (Last, First, Middle Initial)
Beverly Bush

Mailing Address 5931 E. State Rd. 38

City State Zip Code
Kirklin IN 46050

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 13 / 2008

Transaction ID: 81023.C17599

Amount of Each Receipt this Period
200.00

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

C.

Full Name (Last, First, Middle Initial)
Diane Buyer, DDS

Mailing Address 1010 East 86th Street Suite 17

City State Zip Code
Indianapolis IN 46240

FEC ID number of contributing federal political committee. C

Name of Employer Self-Employed Occupation Dentist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 15 / 2008

Transaction ID: 81023.C17667

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) 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 13 / 54
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

A. Full Name (Last, First, Middle Initial)
Elizabeth Carpenter

Mailing Address 2170 Tecumseh Park Lane

City State Zip Code
West Lafayette IN 47906

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

Name of Employer Information Requested Occupation
retired

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

Amount of Each Receipt this Period
50.00

Transaction ID: 81023.C17606

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

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

Mailing Address 6 Hitching Post Rd.

City State Zip Code
West Lafayette IN 47906

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

Name of Employer Consultant Firm Occupation
self

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

Amount of Each Receipt this Period
100.00

Transaction ID: 81023.C17680

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

C. Full Name (Last, First, Middle Initial)
Robert Clark

Mailing Address 9202 East 600 South

City State Zip Code
Zionsville IN 46077

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

Name of Employer self Occupation
Attorney

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

Amount of Each Receipt this Period
500.00

Transaction ID: 81023.C17645

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

SUBTOTAL of Receipts This Page (optional) ▶ **650.00**

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 14 / 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

A.	Full Name (Last, First, Middle Initial) Stephen Cook	Date of Receipt MM / DD / YYYY 10 / 13 / 2008
	Mailing Address 2114 Scott Street	Transaction ID: 81023.C17570
	City State Zip Code Lafayette IN 47904	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Information Requested Occupation Information Requested Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 200.00	

B.	Full Name (Last, First, Middle Initial) Newton Crenshaw	Date of Receipt MM / DD / YYYY 10 / 15 / 2008
	Mailing Address 4560 SOutH 975 East	Transaction ID: 81023.C17685
	City State Zip Code Zionsville IN 46077-7	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Information Requested Occupation Information Requested Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) Mel Daniel	Date of Receipt MM / DD / YYYY 10 / 15 / 2008
	Mailing Address 499 Summit Court	Transaction ID: 81023.C17634
	City State Zip Code Plainfield IN 46168	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Information Requested Occupation Information Requested Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	1600.00
TOTAL This Period (last page this line number only)	

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

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

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

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

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

Mailing Address P.O. Box 767

City State Zip Code
Francesville IN 47946

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

Name of Employer Not Employed Occupation retired

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

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

Transaction ID: 81023.C17607

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 7345 North Washington Blvd.

City State Zip Code
Indianapolis IN 46240

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

Name of Employer Information Requested Occupation Information Requested

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

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

Transaction ID: 81023.C17669

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Alecia Decoudreaux

Mailing Address 13072 Broad Street

City State Zip Code
Carmel IN 46032

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

Name of Employer Information Requested Occupation Information Requested

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

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

Transaction ID: 81023.C17651

Amount of Each Receipt this Period
500.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 54

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Randy Denney

Mailing Address 2678 East 400 South

City State Zip Code
Clayton IN 46118

FEC ID number of contributing federal political committee. C

Name of Employer self Occupation
Excavator

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

Date of Receipt
M M / D D / Y Y Y Y
10 / 15 / 2008

Transaction ID: 81023.C17611

Amount of Each Receipt this Period
500.00

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

B.

Full Name (Last, First, Middle Initial)
Harvey Dick

Mailing Address 283 Grove St.

City State Zip Code
Charleston SC 29403

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation
retired

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

Date of Receipt
M M / D D / Y Y Y Y
10 / 13 / 2008

Transaction ID: 81023.C17577

Amount of Each Receipt this Period
100.00

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

C.

Full Name (Last, First, Middle Initial)
James Dora, Sr.

Mailing Address 2501 South High School Road

City State Zip Code
Indianapolis IN 46241

FEC ID number of contributing federal political committee. C

Name of Employer General Hotels Corp. Occupation
chairman

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

Date of Receipt
M M / D D / Y Y Y Y
10 / 15 / 2008

Transaction ID: 81023.C17608

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) 1600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 54

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Sam Dunaway

Mailing Address P.O. Box 157

City State Zip Code
Fordsville KY 42343

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

Name of Employer self Occupation CEO

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

200.00

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

Transaction ID: 81023.C17566

Amount of Each Receipt this Period
100.00

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

B.

Full Name (Last, First, Middle Initial)
Rex Early

Mailing Address 8315 Union Chapel Rd.

City State Zip Code
Indianapolis IN 46240

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

Name of Employer Carlisle Consolidated Insurance Occupation Insurance Agent

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

1250.00

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

Transaction ID: 81023.C17661

Amount of Each Receipt this Period
1000.00

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

C.

Full Name (Last, First, Middle Initial)
Dennis Faulkenberg

Mailing Address 177 W. Westfield Blvd.

City State Zip Code
Indianapolis IN 46208

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

Name of Employer APPIAN Occupation Pres./CEO

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

1000.00

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

Transaction ID: 81023.C17633

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional)	▶	1600.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 54
(check only one)

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

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

A. Full Name (Last, First, Middle Initial)
Victor Feicht

Mailing Address 995 Harbortowne Rd.

City Charleston State SC Zip Code 29412

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

Name of Employer Information Requested Occupation retired

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

250.00

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

Transaction ID: 81023.C17585

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 2213 State Road 225 East

City Battle Ground State IN Zip Code 47920

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

250.00

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

Transaction ID: 81023.C17586

Amount of Each Receipt this Period
250.00

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

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

Mailing Address P.O. Box 1408

City Muncie State IN Zip Code 47308

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

Name of Employer Not Employed Occupation retired

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

300.00

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

Transaction ID: 81023.C17642

Amount of Each Receipt this Period
200.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **700.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 54

(check only one)

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

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

A.

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

Mailing Address 8508 Green Braes South Drive

City Indianapolis State IN Zip Code 46234

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation retired

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

500.00

Date of Receipt M M / D D / Y Y Y Y
10 / 15 / 2008

Transaction ID: 81023.C17649

Amount of Each Receipt this Period 500.00

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

B.

Full Name (Last, First, Middle Initial)
Al Gatmaitan

Mailing Address 4847 East 100 South

City Avon State IN Zip Code 46123

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

250.00

Date of Receipt M M / D D / Y Y Y Y
10 / 15 / 2008

Transaction ID: 81023.C17630

Amount of Each Receipt this Period 100.00

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

C.

Full Name (Last, First, Middle Initial)
Dorothy Geisler-Tragardh

Mailing Address 13419 Marjac Way

City Mc Cordsville State IN Zip Code 46055

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

500.00

Date of Receipt M M / D D / Y Y Y Y
10 / 15 / 2008

Transaction ID: 81023.C17646

Amount of Each Receipt this Period 500.00

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

SUBTOTAL of Receipts This Page (optional) 1100.00

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 / 54
(check only one)

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

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

A. Full Name (Last, First, Middle Initial)
Anton George

Mailing Address 8030 Spring Mill Road

City State Zip Code
Indianapolis IN 46260

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

Name of Employer Information Requested Occupation Information Requested

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

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

Transaction ID: 81023.C17671

Amount of Each Receipt this Period
2300.00

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

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

Mailing Address 2379 N. 500 E.

City State Zip Code
Avon IN 46123

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

Name of Employer Information Requested Occupation Information Requested

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

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

Transaction ID: 81023.C17602

Amount of Each Receipt this Period
100.00

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

C. Full Name (Last, First, Middle Initial)
Robert Grand

Mailing Address 11 South Meridian Street30 William

City State Zip Code
Indianapolis IN 46260

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

Name of Employer Information Requested Occupation Information Requested
Barnes & Thornburg Attorney

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

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

Transaction ID: 81023.C17638

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **3400.00**

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 21 / 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

A.	Full Name (Last, First, Middle Initial) Bob Guernsey		Date of Receipt MM / DD / YYYY 10 / 15 / 2008		
	Mailing Address 1225 W. 500 S.		Transaction ID: 81023.C17625		
	City Lebanon	State IN	Zip Code 46052	Amount of Each Receipt this Period 200.00	
	FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer self self	Occupation Farmer	Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Election Cycle-to-Date ▼
250.00

B.	Full Name (Last, First, Middle Initial) Steve Hageman		Date of Receipt MM / DD / YYYY 10 / 15 / 2008		
	Mailing Address 8652 E. 900 N.		Transaction ID: 81023.C17644		
	City Remington	State IN	Zip Code 47977	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer self self	Occupation agriculture	Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Election Cycle-to-Date ▼
250.00

C.	Full Name (Last, First, Middle Initial) Kim Hall		Date of Receipt MM / DD / YYYY 10 / 13 / 2008		
	Mailing Address 324 Carlson Drive		Transaction ID: 81023.C17565		
	City Knox	State IN	Zip Code 46534	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer Not Employed	Occupation Homemaker	Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Election Cycle-to-Date ▼
200.00

SUBTOTAL of Receipts This Page (optional)	550.00
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 22 / 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

A.	Full Name (Last, First, Middle Initial) John Hammond III		Date of Receipt MM / DD / YYYY 10 / 10 / 2008		
	Mailing Address 612 E. 13th St.		Transaction ID: 81020.C17520		
	City Indianapolis	State IN	Zip Code 46202	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer IceMiller, LLP	Occupation Attorney		Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Peter Hawryluk		Date of Receipt MM / DD / YYYY 10 / 15 / 2008		
	Mailing Address 8155 Hunt Club Road		Transaction ID: 81023.C17603		
	City Zionsville	State IN	Zip Code 46077	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer self	Occupation Developer		Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Thomas Jones		Date of Receipt MM / DD / YYYY 10 / 13 / 2008		
	Mailing Address 7734 Brookview Lane		Transaction ID: 81023.C17569		
	City Indianapolis	State IN	Zip Code 46250	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer Information Requested	Occupation retired		Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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 23 / 54
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Adam Kallick

Mailing Address 110 East Wahington Street
Suite 402

City Indianapolis State IN Zip Code 46204

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: 81023.C17663

Amount of Each Receipt this Period
1000.00

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

B.

Full Name (Last, First, Middle Initial)
Marsha Katz

Mailing Address 506 Waldron Park Drive

City Haverford State PA Zip Code 19041

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

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

Transaction ID: 81023.C17674

Amount of Each Receipt this Period
2300.00

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

C.

Full Name (Last, First, Middle Initial)
Sharon Katz

Mailing Address 506 Waldron Park Drive

City Haverford State PA Zip Code 19041

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

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

Transaction ID: 81023.C17673

Amount of Each Receipt this Period
2300.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **5600.00**

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 / 54
(check only one)

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

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

A. Full Name (Last, First, Middle Initial)
Joseph Kelley

Mailing Address 1817 Horseback Trail

City State Zip Code
Vienna VA 22182

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

Name of Employer Eli Lilly & Company Occupation Govt Affairs

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

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

Transaction ID: 81023.C17655

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 5843 Circle T Drive

City State Zip Code
Greenwood IN 46143

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

Name of Employer Eli Lilly & Company Occupation Executive

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

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

Transaction ID: 81023.C17647

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
James Krampen

Mailing Address 303 Congressional Blvd.

City State Zip Code
Carmel IN 46032

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

Name of Employer Seven Corner Inc. Occupation insurance executive

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

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

Transaction ID: 81023.C17639

Amount of Each Receipt this Period
1000.00

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

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

A.	Full Name (Last, First, Middle Initial) John Lechleiter	Date of Receipt MM / DD / YYYY 10 / 15 / 2008
	Mailing Address One North Illinois Residence 2302	Transaction ID: 81023.C17672
	City Indianapolis State IN Zip Code 46204	Amount of Each Receipt this Period 2300.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Eli Lilly & Company Occupation CEO Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2300.00	

B.	Full Name (Last, First, Middle Initial) George Lenke, Jr.	Date of Receipt MM / DD / YYYY 10 / 13 / 2008
	Mailing Address 1107 E. Center Street	Transaction ID: 81023.C17581
	City Warsaw State IN Zip Code 46580	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Information Requested Occupation retired Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Matthew Macaluse	Date of Receipt MM / DD / YYYY 10 / 15 / 2008
	Mailing Address 8269 Cloverdale Way	Transaction ID: 81023.C17643
	City Indianapolis State IN Zip Code 46256	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Information Requested Occupation Information Requested Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	2650.00
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 / 54
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

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

A. Full Name (Last, First, Middle Initial)
Tom Massey
Mailing Address P.O. Box 1287
City Evansville State IN Zip Code 47706-1287
FEC ID number of contributing federal political committee. **C**
Name of Employer Bowers Harrison,LLP Occupation Attorney
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00
Date of Receipt 10 / 13 / 2008
Transaction ID: 81023.C17578
Amount of Each Receipt this Period 100.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Darby McCarty
Mailing Address P.O. Box 261
City Ellettsville State IN Zip Code 47429
FEC ID number of contributing federal political committee. **C**
Name of Employer Smithville Telephone Co Occupation CEO
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2250.00
Date of Receipt 10 / 13 / 2008
Transaction ID: 81023.C17583
Amount of Each Receipt this Period 250.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Michael McCormick
Mailing Address 39429 North Tom Morris Road
City Scottsdale State AZ Zip Code 85262
FEC ID number of contributing federal political committee. **C**
Name of Employer Information Requested Occupation retired
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt 10 / 15 / 2008
Transaction ID: 81023.C17656
Amount of Each Receipt this Period 500.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **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 27 / 54

(check only one)

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

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

A.

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

Mailing Address 900 North 10th Street

City State Zip Code
Lafayette IN 47904

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

200.00

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

Transaction ID: 81023.C17623

Amount of Each Receipt this Period
100.00

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

B.

Full Name (Last, First, Middle Initial)
Donnis Mizelle

Mailing Address 1933 Bridgewater Dr.

City State Zip Code
Avon IN 46123

FEC ID number of contributing federal political committee. C

Name of Employer Hendricks Power Co-op Occupation Executive

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

600.00

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

Transaction ID: 81023.C17637

Amount of Each Receipt this Period
500.00

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

C.

Full Name (Last, First, Middle Initial)
Steve Moore

Mailing Address 808 South Anita Street

City State Zip Code
Bloomington IN 47401

FEC ID number of contributing federal political committee. C

Name of Employer CarDon & Assoc. Occupation owner

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

500.00

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

Transaction ID: 81023.C17650

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) 1100.00

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 / 54
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15	

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

<p>A. Full Name (Last, First, Middle Initial) Fred Palmer</p> <p>Mailing Address 4934 E. 100 S.</p> <p>City Avon State IN Zip Code 46123</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer self Occupation Commissioner</p> <p>Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p style="text-align: right;">800.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 8</p> <p>Transaction ID: 81023.C17636</p> <p>Amount of Each Receipt this Period 500.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
---	---

<p>B. Full Name (Last, First, Middle Initial) Yvonne Pettinga</p> <p>Mailing Address 445 West Somerset Drive</p> <p>City Indianapolis State IN Zip Code 46260</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Information Requested Occupation Information Requested</p> <p>Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p style="text-align: right;">1000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 8</p> <p>Transaction ID: 81023.C17657</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
---	--

<p>C. Full Name (Last, First, Middle Initial) Pamela Ratcliff</p> <p>Mailing Address 5172 Gardenia Court</p> <p>City West Lafayette State IN Zip Code 47906</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Information Requested Occupation Information Requested</p> <p>Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p style="text-align: right;">1000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 8</p> <p>Transaction ID: 81023.C17664</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>2500.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

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

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

FOR LINE NUMBER: PAGE 29 / 54
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

A. Full Name (Last, First, Middle Initial)
Forrest Reynolds

Mailing Address 1003 Trapper Hill

City State Zip Code
Houston TX 77077

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

Name of Employer Information Requested Occupation Information Requested

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

1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 15 / 2008

Transaction ID: 81023.C17658

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Evaline Rhodehamel

Mailing Address 8416 Olin Road

City State Zip Code
Indianapolis IN 46278

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

Name of Employer Information Requested Occupation Information Requested

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

200.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 13 / 2008

Transaction ID: 81023.C17580

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 1116 Prospect Ln.

City State Zip Code
Orefield PA 18069

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

Name of Employer self Occupation Physician

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

750.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 13 / 2008

Transaction ID: 81023.C17587

Amount of Each Receipt this Period
500.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 54

(check only one)

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

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

A.

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

Mailing Address 8845 Worthington Circle

City State Zip Code
Indianapolis IN 46278

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY
10 / 15 / 2008

Transaction ID: 81023.C17662

Amount of Each Receipt this Period 1000.00

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

B.

Full Name (Last, First, Middle Initial)
Beurt SerVaas

Mailing Address 1000 Waterway Blvd.

City State Zip Code
Indianapolis IN 46202

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt MM / DD / YYYY
10 / 13 / 2008

Transaction ID: 81023.C17582

Amount of Each Receipt this Period 200.00

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

C.

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

Mailing Address 2817 Plum Ct.

City State Zip Code
Kokomo IN 46902

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt MM / DD / YYYY
10 / 03 / 2008

Transaction ID: 81010.C17354

Amount of Each Receipt this Period 200.00

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

SUBTOTAL of Receipts This Page (optional) 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 31 / 54
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

A. Full Name (Last, First, Middle Initial)
Joe Snyder

Mailing Address 6236 Canterbury Lane

City State Zip Code
Pittsboro IN 46167

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

Name of Employer self Occupation caterer

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

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

Transaction ID: 81023.C17613

Amount of Each Receipt this Period
500.00

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

Note: food & bev. expense

B. Full Name (Last, First, Middle Initial)
Ethna Verkamp

Mailing Address 5044 Watersite Circle

City State Zip Code
Indianapolis IN 46254-9616

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

Name of Employer Information Requested Occupation retired

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

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

Transaction ID: 81023.C17648

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Suzanne Ward

Mailing Address 2424 Cedarwood Dr.

City State Zip Code
Madison IN 47250

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

Name of Employer Not Employed Occupation retired

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

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

Transaction ID: 81023.C17567

Amount of Each Receipt this Period
100.00

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

SUBTOTAL of Receipts This Page (optional) ► **1100.00**

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 32 / 54
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Brad Whicker

Mailing Address 728 Chistin Court

City State Zip Code
Plainfield IN 46168

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

Name of Employer self Occupation owner

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

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

Transaction ID: 81023.C17568

Amount of Each Receipt this Period
100.00

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

B.

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

Mailing Address 519 Southwind

City State Zip Code
Brownsburg IN 46112

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

Name of Employer Information Requested Occupation Information Requested

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

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

Transaction ID: 81023.C17635

Amount of Each Receipt this Period
500.00

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

C.

Full Name (Last, First, Middle Initial)
Doug Williams

Mailing Address 4618 Summersong Road

City State Zip Code
Zionsville IN 46077

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

Name of Employer Venture Logistics, Inc. Occupation business owner

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

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

Transaction ID: 81023.C17659

Amount of Each Receipt this Period
1000.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 54
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

A. Full Name (Last, First, Middle Initial)
Mayor Harold Woodruff
Mailing Address 608 S. Williams Rd.
City Frankfort State IN Zip Code 46041
FEC ID number of contributing federal political committee. **C**
Name of Employer Information Requested Occupation retired
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 200.00
Date of Receipt 10 / 13 / 2008
Transaction ID: 81023.C17598
Amount of Each Receipt this Period 100.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Rob Woznicki
Mailing Address 62 Oaktree Drive
City Brownsburg State IN Zip Code 46112
FEC ID number of contributing federal political committee. **C**
Name of Employer Information Requested Occupation Information Requested
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt 10 / 15 / 2008
Transaction ID: 81023.C17612
Amount of Each Receipt this Period 500.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Fred Wyse
Mailing Address 4036 Ellicott St.
City Alexandria State VA Zip Code 22304
FEC ID number of contributing federal political committee. **C**
Name of Employer Information Requested Occupation scientist
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00
Date of Receipt 10 / 13 / 2008
Transaction ID: 81023.C17573
Amount of Each Receipt this Period 100.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 700.00
TOTAL This Period (last page this line number only) ▶ 39900.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 34 / 54	
	(check only one)			
<input type="checkbox"/> 11a	<input checked="" type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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

A.

Full Name (Last, First, Middle Initial) Donald Stock for Mayor Committee		Date of Receipt	
Mailing Address 800 South Williams Road		M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 8	
City	State	Zip Code	Transaction ID: 81023.C17594
Frankfort	IN	46041	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		50.00	
Name of Employer		Receipt	
Occupation		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2008	Election Cycle-to-Date ▼	50.00	
<input type="checkbox"/> Primary			
<input checked="" type="checkbox"/> General			
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	50.00
TOTAL This Period (last page this line number only)	50.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 35 / 54	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15

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

A. Full Name (Last, First, Middle Initial)
Lafayette Bank & Trust

Mailing Address P.O. Box 1130

City State Zip Code
Lafayette IN 47902-

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
477.66

Date of Receipt

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

Transaction ID: 81020.C17518

Amount of Each Receipt this Period
6.46

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

Note: interest from CD

SUBTOTAL of Receipts This Page (optional)	▶	6.46
TOTAL This Period (last page this line number only)	▶	6.46

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

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

FOR LINE NUMBER:
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Affordable Screen Printing Mailing Address 8262 North Kiger Drive City Monticello State IN Zip Code 47960- 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81023.E8042 Date of Disbursement 10 / 10 / 2008 Amount of Each Disbursement this Period 184.58 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 T-SHIRTS
B.	Full Name (Last, First, Middle Initial) AT&T Wireless Mailing Address P.O. Box 8220 City Fox Valley State IL Zip Code 60572- Purpose of Disbursement cell phone expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81023.E8046 Date of Disbursement 10 / 10 / 2008 Amount of Each Disbursement this Period 298.33 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CELL PHONE EXPENSE
C.	Full Name (Last, First, Middle Initial) AT&T Wireless Mailing Address P.O. Box 8220 City Fox Valley State IL Zip Code 60572- Purpose of Disbursement cell phone expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81023.E8040 Date of Disbursement 10 / 10 / 2008 Amount of Each Disbursement this Period 84.30 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CELL PHONE EXPENSE

SUBTOTAL of Disbursements This Page (optional) ▶

567.21

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) City Bus Mailing Address 1250 Canal Road City Lafayette State IN Zip Code 47902- Purpose of Disbursement advertisement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 81023.E8050 Date of Disbursement 10 / 03 / 2008 Amount of Each Disbursement this Period 1135.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 ADVERTISEMENT
B.	Full Name (Last, First, Middle Initial) Kelly Cook Mailing Address P.O.Box 791 City Brownsburg State IN Zip Code 46112- Purpose of Disbursement rent Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 81023.E8083 Date of Disbursement 10 / 03 / 2008 Amount of Each Disbursement this Period 650.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 RENT
C.	Full Name (Last, First, Middle Initial) Corporate Card Mailing Address P.O. Box 10347 City Des Moines State IA Zip Code 50306- Purpose of Disbursement fundraiser supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 81023.E8029 Date of Disbursement 10 / 10 / 2008 Amount of Each Disbursement this Period 33.53 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FUNDRAISER SUPPLIES

SUBTOTAL of Disbursements This Page (optional) ▶

1818.53

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Corporate Card

Mailing Address P.O. Box 10347

City State Zip Code
Des Moines IA 50306-

Purpose of Disbursement
see below

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 81023.E8030

Date of Disbursement

10 / 10 / 2008

Amount of Each Disbursement this Period

394.80

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SEE BELOW

B.

Full Name (Last, First, Middle Initial)
Espn Zone

Mailing Address

City State Zip Code
Washington DC 20005-

Purpose of Disbursement
food & bev. expense

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 81023.E8033

Date of Disbursement

10 / 10 / 2008

Amount of Each Disbursement this Period

146.42

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: FOOD & BEV. EXPENSE

C.

Full Name (Last, First, Middle Initial)
Exxon

Mailing Address

City State Zip Code
Lafayette IN 47905-

Purpose of Disbursement
gasoline

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 81023.E8034

Date of Disbursement

10 / 10 / 2008

Amount of Each Disbursement this Period

58.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: GASOLINE

SUBTOTAL of Disbursements This Page (optional) ▶

394.80

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Giant Food	Transaction ID: 81023.E8035
	Mailing Address	Date of Disbursement 10 / 10 / 2008
	City: Alexandria State: VA Zip Code: 22314-	Amount of Each Disbursement this Period 61.70
	Purpose of Disbursement: food & bev. expense	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	[MEMO ITEM] MEMO: FOOD & BEV. EXPENSE
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Shell Station	Transaction ID: 81023.E8032
	Mailing Address: 1230 West St. Rd. 32	Date of Disbursement 10 / 10 / 2008
	City: Lebanon State: IN Zip Code: 46052-	Amount of Each Disbursement this Period 48.70
	Purpose of Disbursement: gasoline	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	[MEMO ITEM] MEMO: GASOLINE
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Embarq	Transaction ID: 81023.E8028
	Mailing Address: P.O. Box 74517	Date of Disbursement 10 / 10 / 2008
	City: Atlanta State: GA Zip Code: 30374-	Amount of Each Disbursement this Period 430.54
	Purpose of Disbursement: phone bill	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	PHONE BILL
	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) ▶

430.54

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) GM Card</p> <p>Mailing Address Dept. 9600</p> <p>City Carol Stream State IL Zip Code 60128-</p> <p>Purpose of Disbursement see below</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>Transaction ID: 81023.E8080</p> <p>Date of Disbursement</p> <p>10 / 10 / 2008</p>
	<p>Amount of Each Disbursement this Period</p> <p>4046.02</p>
	<p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
	<p>SEE BELOW</p>
	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>

<p>B.</p> <p>Full Name (Last, First, Middle Initial) BP Oil</p> <p>Mailing Address</p> <p>City Indianapolis State IN Zip Code 46241-</p> <p>Purpose of Disbursement gasoline</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Transaction ID: 81023.E8059</p> <p>Date of Disbursement</p> <p>10 / 10 / 2008</p>
	<p>Amount of Each Disbursement this Period</p> <p>46.06</p>
	<p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
	<p>[MEMO ITEM] MEMO: GASOLINE</p>
	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>

<p>C.</p> <p>Full Name (Last, First, Middle Initial) Boulder Creek Dining</p> <p>Mailing Address 1551 N. Green St.</p> <p>City Brownsburg State IN Zip Code 46112-</p> <p>Purpose of Disbursement food & bev. expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Transaction ID: 81023.E8074</p> <p>Date of Disbursement</p> <p>10 / 10 / 2008</p>
	<p>Amount of Each Disbursement this Period</p> <p>116.24</p>
	<p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
	<p>[MEMO ITEM] MEMO: FOOD & BEV. EXPENSE</p>
	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>4046.02</p>
<p>TOTAL This Period (last page this line number only)</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)
Hoosiers Supporting Buyer For Congress

A.

Full Name (Last, First, Middle Initial)
Buschmans Service Center, Inc.

Mailing Address 210 W. Broadway

City State Zip Code
Monticello IN 47960-

Purpose of Disbursement
auto service

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 81023.E8075

Date of Disbursement

10 / 10 / 2008

Amount of Each Disbursement this Period

47.12

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AUTO SERVICE

B.

Full Name (Last, First, Middle Initial)
Family Express

Mailing Address

City State Zip Code
Lafayette IN 47902-

Purpose of Disbursement
gasoline

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 81023.E8056

Date of Disbursement

10 / 10 / 2008

Amount of Each Disbursement this Period

212.63

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: GASOLINE

C.

Full Name (Last, First, Middle Initial)
Golden Corral

Mailing Address 675 West Southview St.

City State Zip Code
Martinsville IN 46151-

Purpose of Disbursement
food & bev. expense

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 81023.E8058

Date of Disbursement

10 / 10 / 2008

Amount of Each Disbursement this Period

135.35

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: FOOD & BEV. EXPENSE

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Harrison Village

Mailing Address

City State Zip Code

Purpose of Disbursement
fundraiser supplies

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 81023.E8067
Date of Disbursement

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

Amount of Each Disbursement this Period

743.56

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]
MEMO: FUNDRAISER SUPPLIES

B.

Full Name (Last, First, Middle Initial)
Hudson News Cafe

Mailing Address

City State Zip Code
Washington DC 20004-

Purpose of Disbursement
food & bev. expense

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 81023.E8051
Date of Disbursement

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

Amount of Each Disbursement this Period

61.94

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]
MEMO: FOOD & BEV. EXPENSE

C.

Full Name (Last, First, Middle Initial)
Marathon Oil

Mailing Address 1541 W. Thompson Rd.

City State Zip Code
Indianapolis IN 46241-

Purpose of Disbursement
gasoline

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 81023.E8069
Date of Disbursement

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

Amount of Each Disbursement this Period

123.58

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]
MEMO: GASOLINE

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Full Name (Last, First, Middle Initial) Marriott Hotels <hr/> Mailing Address <hr/> City Indianapolis State IN Zip Code 46201- <hr/> Purpose of Disbursement food & bev. expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81023.E8070 Date of Disbursement 10 / 10 / 2008
	Amount of Each Disbursement this Period 68.82
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	[MEMO ITEM] MEMO: FOOD & BEV. EXPENSE
	Category/ Type

B. Full Name (Last, First, Middle Initial) OCharleys <hr/> Mailing Address 10416 east US 36 <hr/> City Avon State IN Zip Code 46168- <hr/> Purpose of Disbursement food & bev. expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81023.E8071 Date of Disbursement 10 / 10 / 2008
	Amount of Each Disbursement this Period 189.62
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	[MEMO ITEM] MEMO: FOOD & BEV. EXPENSE
	Category/ Type

C. Full Name (Last, First, Middle Initial) Shell Station <hr/> Mailing Address <hr/> City Lafayette State IN Zip Code 47903- <hr/> Purpose of Disbursement gasoline Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81023.E8061 Date of Disbursement 10 / 10 / 2008
	Amount of Each Disbursement this Period 64.56
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	[MEMO ITEM] MEMO: GASOLINE
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Speedway Mailing Address 1291 N. Madison City Greenwood State IN Zip Code 46142- Purpose of Disbursement gasoline Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81023.E8065 Date of Disbursement 10 / 10 / 2008 Amount of Each Disbursement this Period 123.78 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: GASOLINE
B.	Full Name (Last, First, Middle Initial) The Ritz Carlton Mailing Address City Greensboro State GA Zip Code 30642- Purpose of Disbursement hotel expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81023.E8057 Date of Disbursement 10 / 10 / 2008 Amount of Each Disbursement this Period 1104.64 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: HOTEL EXPENSE
C.	Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address P.O. Box 630024 City Lafayette State IN Zip Code 47901- Purpose of Disbursement cell phone equipment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81023.E8066 Date of Disbursement 10 / 10 / 2008 Amount of Each Disbursement this Period 74.87 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: CELL PHONE EQUIPMENT

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)

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

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

A.	Full Name (Last, First, Middle Initial) Wal-Mart Mailing Address St. Rd. 24 City Monticello State IN Zip Code 47960- Purpose of Disbursement fundraiser supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81023.E8072 Date of Disbursement 10 / 10 / 2008 Amount of Each Disbursement this Period 410.93 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: FUNDRAISER SUPPLIES
B.	Full Name (Last, First, Middle Initial) Hansen & Associates Mailing Address 12077 Oakwood Dr. City Demotte State IN Zip Code 46310- Purpose of Disbursement printing expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81023.E8082 Date of Disbursement 10 / 10 / 2008 Amount of Each Disbursement this Period 9113.24 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PRINTING EXPENSES
C.	Full Name (Last, First, Middle Initial) Ind. Dept of Revenue Mailing Address 100 N. Senate Ave. City Indianapolis State IN Zip Code 46204- Purpose of Disbursement payroll taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81023.E8039 Date of Disbursement 10 / 10 / 2008 Amount of Each Disbursement this Period 21.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PAYROLL TAXES

SUBTOTAL of Disbursements This Page (optional) ►

9134.24

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Indiana Sheriffs Assoc. Mailing Address 915 West Hanawalt Road City Monticello State IN Zip Code 47960- Purpose of Disbursement donation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81023.E8084 Date of Disbursement 10 / 03 / 2008 Amount of Each Disbursement this Period 250.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 DONATION
B.	Full Name (Last, First, Middle Initial) International Entertainment Bureau Mailing Address 3612 North Washington Blvd. City Indianapolis State IN Zip Code 46205- Purpose of Disbursement advertisement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81023.E8036 Date of Disbursement 10 / 10 / 2008 Amount of Each Disbursement this Period 800.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 ADVERTISEMENT
C.	Full Name (Last, First, Middle Initial) Mail Inc. Mailing Address P.O. Box 5685 City Lafayette State IN Zip Code 47903- Purpose of Disbursement postage/printing expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81023.E8081 Date of Disbursement 10 / 10 / 2008 Amount of Each Disbursement this Period 7135.09 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 POSTAGE/PRINTING EXPENSE

SUBTOTAL of Disbursements This Page (optional) ▶

8185.09

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Main Street Computers Mailing Address 224 N. Main Street P.O. Box 1003 City Monticello State IN Zip Code 47960- Purpose of Disbursement office supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81023.E8038 Date of Disbursement 10 / 10 / 2008 Amount of Each Disbursement this Period 122.01 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 OFFICE SUPPLIES
B.	Full Name (Last, First, Middle Initial) Monticello Water & Sewer Departments Mailing Address P.O. Box 384 City Monticello State IN Zip Code 47960- Purpose of Disbursement water bill Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81023.E8085 Date of Disbursement 10 / 10 / 2008 Amount of Each Disbursement this Period 33.73 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 WATER BILL
C.	Full Name (Last, First, Middle Initial) Morgan, Meredith & Assoc. Mailing Address 2875 Towerview Road Suite 100 City Herndon State VA Zip Code 20171- Purpose of Disbursement fundraiser consultant Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81023.E8045 Date of Disbursement 10 / 10 / 2008 Amount of Each Disbursement this Period 3481.09 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FUNDRAISER CONSULTANT

SUBTOTAL of Disbursements This Page (optional) ▶	3636.83
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)

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

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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>Purpose of Disbursement monthly 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81023.E8087</p> <p>Date of Disbursement 10 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 30.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>MONTHLY FEE</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>Purpose of Disbursement fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81023.E8088</p> <p>Date of Disbursement 10 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 48.20</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>FEES</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Sandler-Innocenzi, Inc.</p> <p>Mailing Address 705 Prince Street</p> <p>City State Zip Code Alexandria VA 22314-</p> <p>Purpose of Disbursement radio production</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81023.E8089</p> <p>Date of Disbursement 10 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 24276.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>RADIO PRODUCTION</p>

SUBTOTAL of Disbursements This Page (optional) ▶

24354.20

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)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) Joe Snyder Mailing Address 6236 Canterbury Lane City Pittsboro State IN Zip Code 46167- Purpose of Disbursement Note: food & bev. expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81023.C17613IK Date of Disbursement 10 / 15 / 2008 Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 IN KIND: NOTE: FOOD & BEV. EXPENSE
B.	Full Name (Last, First, Middle Initial) SugarDog Mailing Address P.O. Box 839 City Monticello State IN Zip Code 47960- Purpose of Disbursement internet service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81023.E8044 Date of Disbursement 10 / 10 / 2008 Amount of Each Disbursement this Period 34.99 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 INTERNET SERVICE
C.	Full Name (Last, First, Middle Initial) Super Test Service Stations Mailing Address 305 W. Broadway Street City Monticello State IN Zip Code 47960- Purpose of Disbursement gasoline Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81023.E8037 Date of Disbursement 10 / 10 / 2008 Amount of Each Disbursement this Period 434.91 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 GASOLINE

SUBTOTAL of Disbursements This Page (optional) ▶

969.90

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)

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

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

A.

Full Name (Last, First, Middle Initial)
Susan Gage Caterers

Mailing Address 209 Pennsylvania Ave.

City Washington State DC Zip Code 20003-

Purpose of Disbursement
food & bev. expense

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 81023.E8048
Date of Disbursement

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

Amount of Each Disbursement this Period

334.40

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

FOOD & BEV. EXPENSE

B.

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

Mailing Address P.O. Box 85036

City Louisville State KY Zip Code 40285-5036

Purpose of Disbursement
shipping

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 81023.E8049
Date of Disbursement

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

Amount of Each Disbursement this Period

30.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SHIPPING

C.

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

Mailing Address 316 Pennsylvania Ave. SE

City Washington State DC Zip Code 20003-

Purpose of Disbursement
facility fee

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 81023.E8047
Date of Disbursement

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

Amount of Each Disbursement this Period

200.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

FACILITY FEE

SUBTOTAL of Disbursements This Page (optional)

564.40

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: 81023.E8086 Date of Disbursement 10 / 10 / 2008
	Mailing Address P.O. Box 630024	Amount of Each Disbursement this Period 101.94
	City Lafayette State IN Zip Code 47901-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement cell phone expense Candidate Name	CELL PHONE EXPENSE
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: 81023.E8043 Date of Disbursement 10 / 10 / 2008
	Mailing Address P.O. Box 630024	Amount of Each Disbursement this Period 65.70
	City Lafayette State IN Zip Code 47901-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement cell phone expense Candidate Name	CELL PHONE EXPENSE
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Vogel Management	Transaction ID: 81023.E8027 Date of Disbursement 10 / 01 / 2008
	Mailing Address P.O. Box 987	Amount of Each Disbursement this Period 250.00
	City Monticello State IN Zip Code 47960-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement rent Candidate Name	RENT
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	417.64
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

A.

Full Name (Last, First, Middle Initial)

Wells Fargo

Mailing Address 119 North Main Street

City Monticello State IN Zip Code 47960-6748

Purpose of Disbursement
wire fee

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 81023.E8090

Date of Disbursement

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

Amount of Each Disbursement this Period

20.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

WIRE FEE

B.

Full Name (Last, First, Middle Initial)

Wells Fargo

Mailing Address 119 North Main Street

City Monticello State IN Zip Code 47960-6748

Purpose of Disbursement
payroll

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 81023.E8026

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	0	8

Amount of Each Disbursement this Period

1169.52

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

PAYROLL

SUBTOTAL of Disbursements This Page (optional) ►

1189.52

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

55708.92

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hill Research Consultants	Nature of Debt (Purpose): poll
Mailing Address 25511 Budde Road Suite 130	
City State ZIP Code The Woodlands TX 77380-	

Outstanding Balance Beginning This Period 0.00	Transaction ID: LS81023.E8092	
Amount Incurred This Period 13185.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 13185.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hansen & Associates	Nature of Debt (Purpose): printing expenses
Mailing Address 12077 Oakwood Dr.	
City State ZIP Code Demotte IN 46310-	

Outstanding Balance Beginning This Period 9113.24	Transaction ID: LS81023.E8082	
Amount Incurred This Period 0.00	Payment This Period 9113.24	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mail Inc.	Nature of Debt (Purpose): postage/printing expense
Mailing Address P.O. Box 5685	
City State ZIP Code Lafayette IN 47903-	

Outstanding Balance Beginning This Period 7135.09	Transaction ID: LS81023.E8081	
Amount Incurred This Period 0.00	Payment This Period 7135.09	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional).....	▶	13185.00
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 54 / 54
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor GM Card			Nature of Debt (Purpose): see below
Mailing Address Dept. 9600			
City Carol Stream	State IL	ZIP Code 60128-	

Outstanding Balance Beginning This Period		Transaction ID: LS81023.E8080	
4046.02			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	4046.02	0.00	

1) SUBTOTALS This Period This Page (optional).....	0.00
2) TOTALS This Period (last page this line number only).....	13185.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	13185.00