

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL
OR
TYPE OR PRINT

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

2000 FEB -7 12 3-06

1. NAME OF COMMITTEE (in full)
MIKE PENCE COMMITTEE

ADDRESS (number and street) ☐ Check if different than previously reported.
P.O. Box 408

CITY, STATE and ZIP CODE
ANDERSON, IN 46015

STATE/DISTRICT
IN / 2ND

2. FEC IDENTIFICATION NUMBER
C00350397

3. IS THIS REPORT AN AMENDMENT?
☐ YES ☒ NO

4. TYPE OF REPORT

☐ April 15 Quarterly Report ☐ 12-Day Pre-Election Report for the _____ (Type of Election)
election on _____ in the State of _____

☐ July 15 Quarterly Report ☐ 30-Day Post-Election Report following the General Election
on _____ in the State of _____

☐ October 15 Quarterly Report

☒ January 31 Year End Report

☐ July 31 Mid-Year Report (Non-election Year Only) ☐ Termination Report

This report contains activity for ☒ Primary Election ☒ General Election ☐ Special Election ☐ Runoff Election

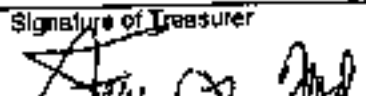
SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
8-30-99 through 12-31-99		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(a))	159,841.13	159,841.13
(b) Total Contribution Refunds (from Line 20(d))	X	X
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	159,841.13	159,841.13
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	9,694.28	9,694.28
(b) Total Offsets to Operating Expenditures (from Line 14)	X	X
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	9,694.28	9,694.28
8. Cash on Hand at Close of Reporting Period (from Line 27)	150,429.95	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	X	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	2300.00	

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

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
STEVEN L FORD

Signature of Treasurer


Date
1/31/00

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5437g.

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FEC FORM 3
(revised 4/87)

DETAILED SUMMARY PAGE

of Receipts and Disbursements
(Page 2, FEC FORM 3)

Name of Committee (in full)		Report Covering the Period:	
MIKE PENCE COMMITTEE		From: 8-30-99	To: 12-31-99
I. RECEIPTS		COLUMN A Total This Period	COLUMN B Calendar Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:			
(a) Individuals/Persons Other Than Political Committees			
(i) Itemized (see Schedule A)		154,367.13	
(ii) Unitemized		2,949.00	
(iii) Total of contributions from individuals		157,316.13	157,316.13
(b) Political Party Committees		0	0
(c) Other Political Committees (such as PACs)		2,525.00	2,525.00
(d) The Candidate		159,841.13	159,841.13
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))		283.10	283.10
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES			
13. LOANS:			
(a) Made or Guaranteed by the Candidate		0	0
(b) All Other Loans		0	0
(c) TOTAL LOANS (add 13(a) and (b))		0	0
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		0	0
15. OTHER RECEIPTS (Dividends, Interest, etc.)		0	0
16. TOTAL RECEIPTS (add 11(a), 12, 13(c), 14 and 15)		160,124.23	160,124.23
II. DISBURSEMENTS			
17. OPERATING EXPENDITURES		9694.28	9694.28
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		0	0
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate		0	0
(b) Of All Other Loans		0	0
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))		0	0
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees		0	0
(b) Political Party Committees		0	0
(c) Other Political Committees (such as PACs)		0	0
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))		0	0
21. OTHER DISBURSEMENTS		0	0
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)		9694.28	9694.28

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$ 0
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$ 160,124.23
25. SUBTOTAL (add Line 23 and Line 24)	\$ 160,124.23
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	\$ 9,694.28
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	\$ 150,429.95

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 1 OF 27
FOR LINE NUMBER 11A

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)

MIKE PENCE COMMITTEE

A. Full Name, Mailing Address and ZIP Code VAN SMITH 805 N. BRIAR ROAD MUNCIE, IN 47304 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer ONTARIO CORT. Occupation CHAIRMAN OF BOARD Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 9-23-99	Amount of Each Receipt this Period \$ 1,000
B. Full Name, Mailing Address and ZIP Code MARGARET SMITH 805 N. BRIAR ROAD MUNCIE, IN 47304 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer HOMEMAKER Occupation Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 9-23-99	Amount of Each Receipt this Period \$ 1,000
C. Full Name, Mailing Address and ZIP Code DICK JOHNSON 9334 RAINTREE DRIVE SOUTH COLUMBUS, IN 47201 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer JOHNSON OIL CO. Occupation CHAIRMAN Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 10-6-99	Amount of Each Receipt this Period \$ 1,000
D. Full Name, Mailing Address and ZIP Code RUTH JOHNSON 9334 RAINTREE DRIVE SOUTH COLUMBUS, IN 47201 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer HOMEMAKER Occupation Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 10-6-99	Amount of Each Receipt this Period \$ 1,000
E. Full Name, Mailing Address and ZIP Code GREGORY PENCE 482 S. MUTZ DRIVE COLUMBUS, IN 47201 Receipt For: ☒ Primary ☒ General ☐ Other (specify):	Name of Employer KEEL BROTHERS OIL CO. Occupation PRESIDENT Aggregate Year-to-Date > \$ 2,000	Date (month, day, year) 9-15-99	Amount of Each Receipt this Period \$ 1,000 - P \$ 1,000 - G
F. Full Name, Mailing Address and ZIP Code HOWARD HUBLER 8220 S. US31 INDIANAPOLIS, IN 46227 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer HUBLER CHEVROLET Occupation PRESIDENT Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 8-18-99	Amount of Each Receipt this Period \$ 1,000
G. Full Name, Mailing Address and ZIP Code THOMAS A. ROSE 9220 E. PRAIRIE ROAD SKOKIE, IL 60203-1642 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer JERUSALEM POST Occupation PUBLISHER Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 8-25-99	Amount of Each Receipt this Period \$ 1,000

SUBTOTAL of Receipts This Page (optional)

8,000

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 2 OF 27
FOR LINE NUMBER 11A

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NAME OF COMMITTEE (In Full)

MIKE PENCE COMMITTEE

A. Full Name, Mailing Address and ZIP Code PETER J. WICKMAN 3401 DEER PARK COURT RICHMOND, IN 47374 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer BELDEN, INC. Occupation MANAGER Aggregate Year-to-Date > \$ 500	Date (month, day, year) 12-15-99	Amount of Each Receipt this Period \$ 500
B. Full Name, Mailing Address and ZIP Code WILLIAM H. GRUPPE P.O. Box 71 MUNCIE, IN 47308 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer G&G OIL CO. OF INDIANA, INC. Occupation PRESIDENT Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 12-3-99	Amount of Each Receipt this Period \$ 1,000
C. Full Name, Mailing Address and ZIP Code MARK O. ELDER 4111 BACKMEYER ROAD RICHMOND, IN 47374-7107 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer INFORMATION REQUESTED Occupation Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 12-27-99	Amount of Each Receipt this Period \$ 1,000
D. Full Name, Mailing Address and ZIP Code PAUL E. SHOOPMAN 4550 W. 116TH STREET ZIONSVILLE, IN 46077 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer DURA BUILDERS, INC. Occupation CHAIRMAN Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 12-23-99	Amount of Each Receipt this Period \$ 1,000
E. Full Name, Mailing Address and ZIP Code SHELLEY L. SHOOPMAN 4550 W. 116TH STREET ZIONSVILLE, IN 46077 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer HOMEMAKER Occupation Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 12-23-99	Amount of Each Receipt this Period \$ 1,000
F. Full Name, Mailing Address and ZIP Code JOE C. DOGGETT 538 FRANKLIN STREET COLUMBUS, IN 47201 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer INFORMATION REQUESTED Occupation Aggregate Year-to-Date > \$ 500	Date (month, day, year) 12-5-99	Amount of Each Receipt this Period \$ 500
G. Full Name, Mailing Address and ZIP Code GEORGE N. MOSEY 262 FORT WAYNE AVE. RICHMOND, IN 47374 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer MOSEY MFG. CO., INC. Occupation OWNER Aggregate Year-to-Date > \$ 500	Date (month, day, year) 12-26-99	Amount of Each Receipt this Period \$ 500

SUBTOTAL of Receipts This Page (optional)

5500

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary PagePAGE 3 OF 27
FOR LINE NUMBER 11A

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NAME OF COMMITTEE (in Full)

MIKE PENCE COMMITTEE

A. Full Name, Mailing Address and ZIP Code

GARY A. HOFMEISTER
3809 E. 92ND STREET
INDIANAPOLIS, IN 46240

Name of Employer

HOFMEISTER PERSONAL SERVICES

Date (month,
day, year)

7-16-99

Amount of Each
Receipt this Period

\$ 1,000

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

CHAIRMAN

Aggregate Year-to-Date > \$ 1,000

B. Full Name, Mailing Address and ZIP Code

LEON R. DIXON
309 WILDWOOD LANE
MUNCIE, IN 47304

Name of Employer

BECKETT BRONZE, INC.

Date (month,
day, year)

12-14-99

Amount of Each
Receipt this Period

\$ 500

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

PRESIDENT

Aggregate Year-to-Date > \$ 500

C. Full Name, Mailing Address and ZIP Code

DONALD M. PEREZ
141 W. 22ND STREET, SUITE 112
ANDERSON, IN 46016

Name of Employer

SELF

Date (month,
day, year)

12-28-99

Amount of Each
Receipt this Period

\$ 250

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

OPHTHALMOLOGIST

Aggregate Year-to-Date > \$ 250

D. Full Name, Mailing Address and ZIP Code

FRANCIS L. WOODS, IV
14 MERIDIAN LANE
INDIANAPOLIS, IN 46220

Name of Employer

NATIONAL FINANCIAL
GROUPDate (month,
day, year)

12-23-99

Amount of Each
Receipt this Period

\$ 500

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

FINANCIAL ADVISOR

Aggregate Year-to-Date > \$ 500

E. Full Name, Mailing Address and ZIP Code

MICHAEL J. HUNT
10387 N. CTRY RD. 1075 E.
BROWNSBURG, IN 46112

Name of Employer

EMILY HUNT FOUNDATION

Date (month,
day, year)

12-12-99

Amount of Each
Receipt this Period

\$ 1,000

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

PRESIDENT

Aggregate Year-to-Date > \$ 1,000

F. Full Name, Mailing Address and ZIP Code

DANNY STAMPER
2000 BOSTON PIKE
RICHMOND, IN

Name of Employer

CARROL ELECTRIC/
THOR CONSTRUCTIONDate (month,
day, year)

12-21-99

Amount of Each
Receipt this Period

\$ 300

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

CONSTRUCTION CONTRACTING

Aggregate Year-to-Date > \$ 300

G. Full Name, Mailing Address and ZIP Code

STEPHEN R. HUNT
17422 RIM ROCK DRIVE
GOLDEN, CO 80401

Name of Employer

SELF

Date (month,
day, year)

12-14-99

Amount of Each
Receipt this Period

\$ 1,000

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 1,000

SUBTOTAL of Receipts This Page (optional)

4,550

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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Detailed Summary PagePAGE 4 OF 27
FOR LINE NUMBER 11A

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NAME OF COMMITTEE (in Full)

MIKE PENCE COMMITTEE

A. Full Name, Mailing Address and ZIP Code

P.E. MACALISTER
P.O. Box 1941
INDIANAPOLIS, IN 46206

Name of Employer

MACALISTER MACHINERY, INC.

Date (month, day, year)

12-28-99

Amount of Each Receipt this Period

\$ 1,000

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

CHAIRMAN

Aggregate Year-to-Date > \$ 1,000

B. Full Name, Mailing Address and ZIP Code

SUSANN LYNN MAIDLOW
15908 EMERALD LANE
MIDDLETOWN, IN 47356

Name of Employer

INFORMATION REQUESTED

Date (month, day, year)

12-21-99

Amount of Each Receipt this Period

\$ 500

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 500

C. Full Name, Mailing Address and ZIP Code

WILLIAM J. FREDERICKS
2604 W. HUNTSVILLE ROAD
PENDLETON, IN 46064

Name of Employer

INFORMATION REQUESTED

Date (month, day, year)

12-14-99

Amount of Each Receipt this Period

\$ 500

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 500

D. Full Name, Mailing Address and ZIP Code

JEFFREY L. PAYNE
1107 E. MAIN STREET
MUNCIE, IN 47305

Name of Employer

INFORMATION REQUESTED

Date (month, day, year)

12-15-99

Amount of Each Receipt this Period

\$ 1,000

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 1,000

E. Full Name, Mailing Address and ZIP Code

EDWARD P. PENCE
5223 NORTHWOOD DRIVE
COLUMBUS, IN 47201

Name of Employer

CUMMINS ENGINE CO.

Date (month, day, year)

12-22-99

Amount of Each Receipt this Period

\$ 1,000

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

VICE PRESIDENT

Aggregate Year-to-Date > \$ 1,000

F. Full Name, Mailing Address and ZIP Code

DONALD C. DANIELSON
727 LELAND STREET
NEW CASTLE, IN 47362

Name of Employer

CITY SECURITIES

Date (month, day, year)

12-28-99

Amount of Each Receipt this Period

\$ 1,000

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

VICE CHAIRMAN IF BOARD

Aggregate Year-to-Date > \$ 1,000

G. Full Name, Mailing Address and ZIP Code

KEVIN SCOTT STARKS
9624 N. 800 W.
DALEVILLE, IN 47334

Name of Employer

INFORMATION REQUESTED

Date (month, day, year)

12-20-99

Amount of Each Receipt this Period

\$ 250

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 250

SUBTOTAL of Receipts This Page (optional)

52.50

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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Detailed Summary PagePAGE 5 OF 27
FOR LINE NUMBER 11A

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NAME OF COMMITTEE (in full)

MIKE PENCE COMMITTEE

A. Full Name, Mailing Address and ZIP Code

SUSAN L. HUNT
17422 RIMROCK DRIVE
GOLDEN, CO 80401

Name of Employer

HOMEMAKER

Date (month,
day, year)

12-14-99

Amount of Each
Receipt this Period

\$ 1,000

Receipt For:

☒ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 1,000

B. Full Name, Mailing Address and ZIP Code

AMY D. HUNT
10387 N. CRY RD. 1075E.
BROWNSBURG, IN 46112

Name of Employer

AVON PUBLIC SCHOOLS

Date (month,
day, year)

12-12-99

Amount of Each
Receipt this Period

\$ 1,000

Receipt For:

☒ Primary ☐ General
☐ Other (specify):

Occupation

TEACHER

Aggregate Year-to-Date > \$ 1,000

C. Full Name, Mailing Address and ZIP Code

ROBERT HUNT
5195 MCINTYRE STREET
GOLDEN, CO 80403

Name of Employer

RETIRED

Date (month,
day, year)

12-6-99

Amount of Each
Receipt this Period

\$ 1,000

Receipt For:

☒ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 1,000

D. Full Name, Mailing Address and ZIP Code

KATHLEEN A. HUNT
5195 MCINTYRE STREET
GOLDEN, CO 80403

Name of Employer

HOMEMAKER

Date (month,
day, year)

12-6-99

Amount of Each
Receipt this Period

\$ 1,000

Receipt For:

☒ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 1,000

E. Full Name, Mailing Address and ZIP Code

CAREN A. MILLER
14848 W. 49TH PLACE
GOLDEN, CO 80403-1770

Name of Employer

COLORADO ASSN.
OF REALTORSDate (month,
day, year)

12-8-99

Amount of Each
Receipt this Period

\$ 1,000

Receipt For:

☒ Primary ☐ General
☐ Other (specify):

Occupation

DIRECTOR OF TRAINING

Aggregate Year-to-Date > \$ 1,000

F. Full Name, Mailing Address and ZIP Code

JERRY G. WISE
4021 W. KILGORE AVE.
MUNCIE, IN 47304-4815

Name of Employer

INFORMATION REQUESTED

Date (month,
day, year)

12-17-99

Amount of Each
Receipt this Period

\$ 1,000

Receipt For:

☒ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 1,000

G. Full Name, Mailing Address and ZIP Code

V. REBECCA MACALISTER
4702 BRIAR PATCH COURT
INDIANAPOLIS, IN 46250

Name of Employer

HOMEMAKER

Date (month,
day, year)

12-28-99

Amount of Each
Receipt this Period

\$ 1,000

Receipt For:

☒ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 1,000

SUBTOTAL of Receipts This Page (optional)

7000

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary PagePAGE 6 OF 127
FOR LINE NUMBER 11A

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NAME OF COMMITTEE (in Full)

MIKE PENCE COMMITTEE

A. Full Name, Mailing Address and ZIP Code

HART N. HASTEN
901 ROUNDTABLE COURT
INDIANAPOLIS, IN 46260

Receipt For:

☒ Primary☒ General☐ Other (specify):

Name of Employer

HASTEN BANCORP

Occupation

CHAIRMAN

Aggregate Year-to-Date

> \$2,000

Date (month,
day, year)

12-17-99

Amount of Each
Receipt this Period

\$1,000 - P

\$1,000 - G

B. Full Name, Mailing Address and ZIP Code

PATRICIA ELROD
2134 FOXCLIFF, N.
MARTINSVILLE, IN 46151

Receipt For:

☒ Primary☐ General☐ Other (specify):

Name of Employer

LIGHT SAVERY, INC.

Occupation

OWNER

Aggregate Year-to-Date

> \$250

Date (month,
day, year)

12-15-99

Amount of Each
Receipt this Period

\$250

C. Full Name, Mailing Address and ZIP Code

BARRY TURNER
4430 N. RIVERSIDE DRIVE
COLUMBUS, IN 47203

Receipt For:

☒ Primary☐ General☐ Other (specify):

Name of Employer

TURNER'S MACHINING
SPECIALTIES, INC.

Occupation

OWNER

Aggregate Year-to-Date

> \$500

Date (month,
day, year)

12-21-99

Amount of Each
Receipt this Period

\$500

D. Full Name, Mailing Address and ZIP Code

SIMONA HASTEN
901 ROUNDTABLE COURT
INDIANAPOLIS, IN 46260

Receipt For:

☒ Primary☒ General☐ Other (specify):

Name of Employer

HOMEMAKER

Occupation

Aggregate Year-to-Date

> \$2,000

Date (month,
day, year)

12-17-99

Amount of Each
Receipt this Period

\$1,000 - P

\$1,000 - G

E. Full Name, Mailing Address and ZIP Code

STEVE MOSEY
1099 BOSTON TWP. LANE ROAD
RICHMOND, IN 47374

Receipt For:

☒ Primary☐ General☐ Other (specify):

Name of Employer

MOSEY MFG. CO.

Occupation

EXEC. V. PRES.

Aggregate Year-to-Date

> \$500

Date (month,
day, year)

12-16-99

Amount of Each
Receipt this Period

\$500

F. Full Name, Mailing Address and ZIP Code

HOYT C. NEAL
8204 N. SANTA BARBARA DRIVE
MUNCIE, IN 47303

Receipt For:

☒ Primary☐ General☐ Other (specify):

Name of Employer

G&G OIL CO.

Occupation

EXECUTIVE

Aggregate Year-to-Date

> \$1,000

Date (month,
day, year)

12-3-99

Amount of Each
Receipt this Period

\$1,000

G. Full Name, Mailing Address and ZIP Code

JOSEPH E. WILSON
P.O. BOX 548
MUNCIE, IN 47308-0548

Receipt For:

☒ Primary☐ General☐ Other (specify):

Name of Employer

MUNCIE POWER PRODUCTS

Occupation

PRESIDENT

Aggregate Year-to-Date

> \$1,000

Date (month,
day, year)

12-1-99

Amount of Each
Receipt this Period

\$1,000

SUBTOTAL of Receipts This Page (optional)

\$7250

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

MIKE PENCE COMMITTEE

A. Full Name, Mailing Address and ZIP Code WILLIAM F. HARVEY 8949 SASSAFRASS COURT INDIANAPOLIS, IN 46260 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer RETIRED Occupation Aggregate Year-to-Date > \$ 500	Date (month, day, year) 12-30-99	Amount of Each Receipt this Period \$ 500
B. Full Name, Mailing Address and ZIP Code CAROL A. STEPHAN 3048 LEHIGH COURT INDIANAPOLIS, IN 46268 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer HOME MAKER Occupation Aggregate Year-to-Date > \$ 250	Date (month, day, year) 12-31-99	Amount of Each Receipt this Period \$ 250
C. Full Name, Mailing Address and ZIP Code JUDITH PENCE 1349 HELFORD LANE CARMEL, IN 46032-8335 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer HOME MAKER Occupation Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 12-31-99	Amount of Each Receipt this Period \$ 1,000
D. Full Name, Mailing Address and ZIP Code ROBERT DAPPER 7857 BEANBLOSSOM CIRCLE INDIANAPOLIS, IN 46256 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer ROYAL SA MANUFACTURING Occupation PRESIDENT Aggregate Year-to-Date > \$ 350	Date (month, day, year) 12-29-99	Amount of Each Receipt this Period \$ 350
E. Full Name, Mailing Address and ZIP Code MARK A. BAILEY 1820 BOX ELDER COURT INDIANAPOLIS, IN 46260 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer STARK DOMINGUEZ SMITH Occupation ATTORNEY Aggregate Year-to-Date > \$ 500	Date (month, day, year) 12-28-99	Amount of Each Receipt this Period \$ 500
F. Full Name, Mailing Address and ZIP Code PATRICIA SEASOR BAILEY 1820 BOX ELDER COURT INDIANAPOLIS, IN 46260 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer STARK DOMINGUEZ SMITH Occupation ATTORNEY Aggregate Year-to-Date > \$ 500	Date (month, day, year) 12-28-99	Amount of Each Receipt this Period \$ 500
G. Full Name, Mailing Address and ZIP Code NAOMI E. JEWETT 2805 LITTLE RIVER RUN FORT WAYNE, IN 46804 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer AUTO COMMISSION SERVICE Occupation OWNER Aggregate Year-to-Date > \$ 500	Date (month, day, year) 12-29-99	Amount of Each Receipt this Period \$ 500

SUBTOTAL of Receipts This Page (optional)

3600

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

MIKE PENCE COMMITTEE

A. Full Name, Mailing Address and ZIP Code ROBERT A. HOLT 6901 S. BOUGAINVILLEA TERR. MUNCIE, IN 47302 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer ONTARIO CORP. Occupation EXECUTIVE Aggregate Year-to-Date > \$ 500	Date (month, day, year) 11-28-99	Amount of Each Receipt this Period \$ 500
B. Full Name, Mailing Address and ZIP Code CLELL W. DOUGLASS P.O. BOX 1082 MUNCIE, IN 47308-1082 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer INFORMATION REQUESTED Occupation Aggregate Year-to-Date > \$ 250	Date (month, day, year) 11-27-99	Amount of Each Receipt this Period \$ 250
C. Full Name, Mailing Address and ZIP Code MARY JANE SURSA 3410 WEST UNIVERSITY AVE. MUNCIE, IN 47304 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer HOMEMAKER Occupation Aggregate Year-to-Date > \$ 500	Date (month, day, year) 11-27-99	Amount of Each Receipt this Period \$ 500
D. Full Name, Mailing Address and ZIP Code DAVID SURSA 3410 WEST UNIVERSITY AVE. MUNCIE, IN 47304 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer INFORMATION REQUESTED Occupation Aggregate Year-to-Date > \$ 500	Date (month, day, year) 11-26-99	Amount of Each Receipt this Period \$ 500
E. Full Name, Mailing Address and ZIP Code TERRY L. WALKER 8804 W. TULIPTREE DRIVE MUNCIE, IN 47304-9369 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer INFORMATION REQUESTED Occupation Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 11-29-99	Amount of Each Receipt this Period \$ 1,000
F. Full Name, Mailing Address and ZIP Code DALE A. FEANNERY P.O. BOX 71 MUNCIE, IN 47308 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer G46 OIL CO. Occupation EXECUTIVE Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 12-8-99	Amount of Each Receipt this Period \$ 1,000
G. Full Name, Mailing Address and ZIP Code ROBERT S. CURTIS 5505 W. PINERIDGE ROAD MUNCIE, IN 47304 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer INFORMATION REQUESTED Occupation Aggregate Year-to-Date > \$ 500	Date (month, day, year) 12-8-99	Amount of Each Receipt this Period \$ 500

SUBTOTAL of Receipts This Page (optional)

4250

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SCHEDULE A

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NAME OF COMMITTEE (in Full)

MIKE PENCE COMMITTEE

A. Full Name, Mailing Address and ZIP Code H. D. SHAFER P.O. Box 548 MUNCIE, IN 47308 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer MUNCIE POWER PRODUCTS, INC. Occupation PRES. Aggregate Year-to-Date > \$ 500	Date (month, day, year) 11-29-99	Amount of Each Receipt this Period \$ 500
B. Full Name, Mailing Address and ZIP Code PHYLLIS C. SHAFER 3500 W. GATEWOOD LANE MUNCIE, IN 47304-0548 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer MUNCIE POWER PRODUCTS Occupation EXECUTIVE Aggregate Year-to-Date > \$ 500	Date (month, day, year) 11-29-99	Amount of Each Receipt this Period \$ 500
C. Full Name, Mailing Address and ZIP Code RUSSELL L. TOLER 7124 E. NAVIGATOR LANE TUCSON, AZ 85706 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer TB & P TRUCKING, INC. Occupation EXECUTIVE Aggregate Year-to-Date > \$ 500	Date (month, day, year) 11-29-99	Amount of Each Receipt this Period \$ 500
D. Full Name, Mailing Address and ZIP Code FRANCES P. SARGENT 2207 WEST WILTSHIRE ROAD MUNCIE, IN 47304-3350 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer HOMEMAKER Occupation Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 11-28-99	Amount of Each Receipt this Period \$ 1,000
E. Full Name, Mailing Address and ZIP Code JULIE A. SKINNER 5101 N. NEBO ROAD MUNCIE, IN 47304 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer INFORMATION REQUESTED Occupation Aggregate Year-to-Date > \$ 500	Date (month, day, year) 11-29-99	Amount of Each Receipt this Period \$ 500
F. Full Name, Mailing Address and ZIP Code JACK E. BUCKLES 110 E. CHARLES MUNCIE, IN 47305-2612 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer INFORMATION REQUESTED Occupation Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 11-29-99	Amount of Each Receipt this Period \$ 1,000
G. Full Name, Mailing Address and ZIP Code ELEANOR L. HOLT 6901 S. BOUGAINVILLEA TERR. MUNCIE, IN 47302 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer HOMEMAKER Occupation Aggregate Year-to-Date > \$ 500	Date (month, day, year) 11-28-99	Amount of Each Receipt this Period \$ 500

SUBTOTAL of Receipts This Page (optional)

4500

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SCHEDULE A

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NAME OF COMMITTEE (in full)

MIKE PENCE COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
HAROLD FORCE 11700 W. MAPLE STREET COLUMBUS, IN 47201	FORCE CONSTRUCTION Co.	12-13-99	\$250
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation: PRESIDENT	Aggregate Year-to-Date: > \$250	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JAMES R. SCHRECONOST 201 TIMBER RIDGE COURT MUNCIE, IN 47304	RETIRED	12-3-99	\$500
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation:	Aggregate Year-to-Date: > \$500	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
WILLIAM H. GRUPPE, III 2605 W. PURDUE ROAD MUNCIE, IN 47304	G & G OIL Co.	12-8-99	\$1,000
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation: EXECUTIVE	Aggregate Year-to-Date: > \$1,000	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
LOIS N. WALKER 2660 S. PRIESTFORD ROAD YORKTOWN, IN 47396-9726	HOMEMAKER	12-3-99	\$1,000
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation:	Aggregate Year-to-Date: > \$1,000	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
PETER H. DRUMM 207 N. HIGH STREET MUNCIE, IN 47305-1622	SELF	11-30-99	\$1,000
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation: ATTORNEY	Aggregate Year-to-Date: > \$1,000	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MARK C. SMITH 2700 W. BERKSHIRE DR. MUNCIE, IN 47304	SIGERY LABORATORIES / IN	11-29-99	\$788.63
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation: VICE PRESIDENT, MARKETING	Aggregate Year-to-Date: > \$788.63	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MICHAEL L. COX P.O. BOX 792 MUNCIE, IN 47308-0792	INFORMATION REQUESTED	11-30-99	\$1,000
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation:	Aggregate Year-to-Date: > \$1,000	

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5538.63

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SCHEDULE A

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NAME OF COMMITTEE (in full)

MIKE PENCE COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
RODGER HALL 3596 NEWHOUSE PLACE GREENWOOD, IN 46143-9458	HALL'S HOUSE LUMBER CO. Occupation: BUSINESSMAN	12-2-99	\$ 1,000
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 1,000		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
PEGGY HALL 3596 NEWHOUSE PLACE GREENWOOD, IN 46143-9458	HOMEMAKER	12-2-99	\$ 1,000
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 1,000		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
GILBERT F. VIETS 760 WOOD COURT ZIONSVILLE, IN 46077	ARTHUR ANDERSEN Occupation: MANAGING PARTNER	12-2-99	\$ 1,000
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 1,000		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
T.P. DONOVAN P.O. BOX 151 INDIANAPOLIS, IN 46206	T.P. DONOVAN INVESTMENTS Occupation: OWNER	12-1-99	\$ 1,000
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 1,000		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JUDITH K. DONOVAN P.O. BOX 151 INDIANAPOLIS, IN 46206	HOMEMAKER	12-1-99	\$ 1,000
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 1,000		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JANET L. HAGE 5281 IVY HILL DRIVE CARMEL, IN 46033	INFORMATION REQUESTED	12-1-99	\$ 1,000
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 1,000		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MICHAEL R. HALL 2001 MULLINIX ROAD GREENWOOD, IN 46143	RAYSKULMAN AUTOMOTIVE Occupation: GENERAL MANAGER	11-30-99	\$ 1,000
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 1,000		

SUBTOTAL of Receipts This Page (optional)

7000

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SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

MIKE PENCE COMMITTEE

A. Full Name, Mailing Address and ZIP Code ANN J. PENCE 2717 RIVERSIDE DRIVE COLUMBUS, IN 47201	Name of Employer HOMEMAKER Occupation	Date (month, day, year) 12-3-99	Amount of Each Receipt This Period \$ 1,000
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 1,000		
B. Full Name, Mailing Address and ZIP Code BARBARA HUDDLESTON 3202 BYRD DRIVE INDIANAPOLIS, IN 46227	Name of Employer HOMEMAKER Occupation	Date (month, day, year) 12-1-99	Amount of Each Receipt This Period \$ 1,000
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 1,000		
C. Full Name, Mailing Address and ZIP Code THOMAS H. VICKERS 3805 COVE ROAD COLUMBUS, IN 47203	Name of Employer RETIRED Occupation	Date (month, day, year) 12-3-99	Amount of Each Receipt This Period \$ 250.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 250		
D. Full Name, Mailing Address and ZIP Code KEVIN Q. WALSH 5163 N. SHORELAND AVENUE WHITEFISH BAY, WI 53217	Name of Employer INFORMATION REQUESTED Occupation	Date (month, day, year) 12-1-99	Amount of Each Receipt This Period \$ 250
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 250		
E. Full Name, Mailing Address and ZIP Code MRS. FRANKLIN JACKSON 6900 SOUTH GRAY ROAD INDIANAPOLIS, IN 46237	Name of Employer HOMEMAKER Occupation	Date (month, day, year) 12-2-99	Amount of Each Receipt This Period \$ 1,000
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 1,000		
F. Full Name, Mailing Address and ZIP Code ROGER P. TENNYSON 8750 STALHOEN ROAD INDIANAPOLIS, IN 46260	Name of Employer IN GETTING FOR LIFE Occupation DIRECTOR	Date (month, day, year) 12-2-99	Amount of Each Receipt This Period \$ 500
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 500		
G. Full Name, Mailing Address and ZIP Code RALPH E. DENNIS 411 N. GREENBRIAR ROAD MUNCIE, IN 47304	Name of Employer DENNIS WANGER & ABRELL PC Occupation ATTORNEY	Date (month, day, year) 12-2-99	Amount of Each Receipt This Period \$ 500
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 500		

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4500

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SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

MIKE PENCE COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ARTHUR F. BECK 8215 WOODLAND CREEK COLUMBUS, IN 47201	BECK HARRISON & DALMBERT Attorney	12-7-99	\$ 1,000
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 1,000		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
WESSLEY E. JACKSON 6900 SOUTH GRAY ROAD INDIANAPOLIS, IN 46237	BASIC AMERICAN INDUSTRIES Executive	12-2-99	\$ 1,000
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 1,000		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
THERESE A. ROONEY 7440 WOODLAND DRIVE INDIANAPOLIS, IN 46278	GOLDEN RULE FINANCIAL CORP. Chairwoman/CEO	12-6-99	\$ 1,000
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 1,000		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
J. PATRICK ROONEY 7440 WOODLAND DRIVE INDIANAPOLIS, IN 46278	RETIRED	12-9-99	\$ 1,000
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 1,000		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BRIAN J. SHUFF 8642 HIGHWOODS LANE INDIANAPOLIS, IN 46278	SELF	12-6-99	\$ 1,000
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 1,000		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DANIEL W. TEPKE 11644 BRADFORD TRACE CARMEL, IN 46033	GOLDEN RULE FINANCIAL CORP. SR. VICE PRES.	12-6-99	\$ 1,000
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 1,000		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
PATRICIA G. ROONEY 613 N. EAST STREET INDIANAPOLIS, IN 46278	NEW HARMONY PROJECT MANAGING DIRECTOR	12-9-99	\$ 1,000
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 1,000		

SUBTOTAL of Receipts This Page (optional)

7000

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SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (in full)

MIKE PENCE COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DARRELL S. RICHEY 7244 TULIPTREE TRAIL INDIANAPOLIS, IN 46256	GOLDEN RULE INSURANCE CO. Occupation: ATTORNEY	12-3-99	\$ 1,000
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 1,000		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
STEVE POLLACK 14491 QUAIL POINT DRIVE CARMEL, IN 46032	GOLDEN RULE FINANCIAL CORP Occupation: CHIEF INVESTMENT OFF.	12-4-99	\$ 1,000
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 1,000		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
RICK E. MOYER 8890 JULES LANE INDIANAPOLIS, IN 46278	SELF Occupation:	12-6-99	\$ 1,000
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 1,000		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CATHLEEN L. ROONEY 8890 JULES LANE INDIANAPOLIS, IN 46278	GOLDEN RULE FINANCIAL CORP Occupation: CHIEF ADMIN. OFFICER	12-7-99	\$ 1,000
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 1,000		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CHRISTINE R. MERCHANT 7299 OAK COVE LANE NOBLESVILLE, IN 46060	SELF Occupation:	12-7-99	\$ 1,000
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 1,000		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DON R. SCHEIDT 1024 LARWING DRIVE COLUMBUS, IN 47203	DON R. SCHEIDT & CO., INC. Occupation: REAL ESTATE BROKER	12-9-99	\$ 250
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 250		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CHARLES A. PEHETTE 1018 SARATOGA CIRCLE INDIANAPOLIS, IN 46280	MARK III MGMT. Occupation: BUYER-DEVELOPER	12-8-99	\$ 1,000
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 1,000		

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6250

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NAME OF COMMITTEE (in Full)

MIKE PENCE COMMITTEE

A. Full Name, Mailing Address and ZIP Code JAMES F. ACKERMAN 8910 PURDUE ROAD, SUITE G90 INDIANAPOLIS, IN 46268-1170 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer CARDINAL VENTURES Occupation OWNER Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 11-24-99	Amount of Each Receipt this Period \$ 1,000
B. Full Name, Mailing Address and ZIP Code STEPHEN C. HILBERT 1143 WEST 116TH STREET CARMEL, IN 46032 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer CONSECO, INC. Occupation CHAIRMAN Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 12-2-99	Amount of Each Receipt this Period \$ 1,000
C. Full Name, Mailing Address and ZIP Code TOMISUE HILBERT 1143 WEST 116TH STREET CARMEL, IN 46032 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer HOMEMAKER Occupation Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 12-2-99	Amount of Each Receipt this Period \$ 1,000
D. Full Name, Mailing Address and ZIP Code CHARLES E. LANHAM 7564 SILVER PINE COURT INDIANAPOLIS, IN 46250 Receipt For: ☒ Primary ☒ General ☐ Other (specify):	Name of Employer KLIPSCH LANHAM, INC. Occupation EXECUTIVE Aggregate Year-to-Date > \$ 2,000	Date (month, day, year) 12-2-99	Amount of Each Receipt this Period \$ 1,000 - P \$ 1,000 - G
E. Full Name, Mailing Address and ZIP Code SHARON KITTLE 10500 JONKER LANE CARMEL, IN 46032 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer HOMEMAKER Occupation Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 11-29-99	Amount of Each Receipt this Period \$ 1,000
F. Full Name, Mailing Address and ZIP Code JIM KITTLE, JR. 8600 ALLISONVILLE ROAD INDIANAPOLIS, IN 46250 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer KITTLES, INC. Occupation PRESIDENT Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 12-1-99	Amount of Each Receipt this Period \$ 1,000
G. Full Name, Mailing Address and ZIP Code MR. STEVE KLIPSCH 10069 WINDWARD PASS FISHERS, IN 46038 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer INFORMATION REQUESTED Occupation Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 12-2-99	Amount of Each Receipt this Period \$ 1,000

SUBTOTAL of Receipts This Page (optional)

8000

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

NAME OF COMMITTEE (In Full)

MIKE PENCE COMMITTEE

A. Full Name, Mailing Address and ZIP Code CARL KIEL 1901 TAYLOR ROAD COLUMBUS, IN 47203 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer RETIRED Occupation Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 11-18-99	Amount of Each Receipt this Period \$ 1,000
B. Full Name, Mailing Address and ZIP Code MICHAEL D. McCORMACK 8909 PURDUE ROAD #500 INDIANAPOLIS, IN 46268 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer BWI Occupation ATTORNEY Aggregate Year-to-Date > \$ 500	Date (month, day, year) 11-20-99	Amount of Each Receipt this Period \$ 500
C. Full Name, Mailing Address and ZIP Code THOMAS H. CORSON 600 SKYVIEW DRIVE MIDDLEBURY, IN 46540 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer COACHMAN INDUSTRIES Occupation CHAIRMAN EMERITUS Aggregate Year-to-Date > \$ 500	Date (month, day, year) 11-16-99	Amount of Each Receipt this Period \$ 500
D. Full Name, Mailing Address and ZIP Code JEANETTE S. QUILHOT 5535 REED ROAD FORT WAYNE, IN 46835 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer HOMEMAKER Occupation Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 11-17-99	Amount of Each Receipt this Period \$ 1,000
E. Full Name, Mailing Address and ZIP Code T. CRAIG HAWES 2574 UNION STREET COLUMBUS, IN 47201 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer HAWES OFFICE EQUIP. Occupation PRESIDENT Aggregate Year-to-Date > \$ 500	Date (month, day, year) 11-18-99	Amount of Each Receipt this Period \$ 500
F. Full Name, Mailing Address and ZIP Code THOMAS C. COBLE 9141 ADMIRALS BAY DRIVE INDIANAPOLIS, IN 46236 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer COBLE PROPERTIES Occupation INDUST. REAL ESTATE DEV. Aggregate Year-to-Date > \$ 500	Date (month, day, year) 11-18-99	Amount of Each Receipt this Period \$ 500
G. Full Name, Mailing Address and ZIP Code RICHARD B. PEASE 4141 W. CARR HILL ROAD COLUMBUS, IN 47201 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer ENKIE AMERICA, INC. Occupation EXEC. VICE PRES. Aggregate Year-to-Date > \$ 250	Date (month, day, year) 11-23-99	Amount of Each Receipt this Period \$ 250

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

4250

SCHEDULE A

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NAME OF COMMITTEE (In Full)

MIKE PENCE COMMITTEE

A. Full Name, Mailing Address and ZIP Code JOHN K. KEACH 4320 N. RIVERSIDE DRIVE COLUMBUS, IN 47203 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer RETIRED Occupation Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 11-15-99	Amount of Each Receipt this Period \$ 1,000
B. Full Name, Mailing Address and ZIP Code JAMES K. BAKER 12044 W. STATE RD. 46 COLUMBUS, IN 47201 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer REKAB Occupation SECRETARY-TREASURER Aggregate Year-to-Date > \$ 250	Date (month, day, year) 11-14-99	Amount of Each Receipt this Period \$ 250
C. Full Name, Mailing Address and ZIP Code WILLIAM C. DENNIS 7901 LANTEEN ROAD INDIANAPOLIS, IN 46256 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer LIBERTY FUND, INC. Occupation FOUNDATION EXEC. Aggregate Year-to-Date > \$ 500	Date (month, day, year) 11-15-99	Amount of Each Receipt this Period \$ 500
D. Full Name, Mailing Address and ZIP Code ROWEN M. DICK 9085 E. SR 334 ZIONSVILLE, IN 46077 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer CONSECO Occupation FINANCE Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 11-15-99	Amount of Each Receipt this Period \$ 1,000
E. Full Name, Mailing Address and ZIP Code HELEN E. DICK 9085 E. SR 334 ZIONSVILLE, IN 46077 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer HOMEMAKER Occupation Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 11-15-99	Amount of Each Receipt this Period \$ 1,000
F. Full Name, Mailing Address and ZIP Code ROBERT J. HILER 555 MICHIGAN AVE, SUITE 205 LA PORTE, IN 46350 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer RETIRED Occupation Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 11-15-99	Amount of Each Receipt this Period \$ 1,000
G. Full Name, Mailing Address and ZIP Code THEODORE C. KIEL 2537 RIVERSIDE DRIVE COLUMBUS, IN 47201 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer KIEL BROTHERS OIL CO. Occupation CHAIRMAN Aggregate Year-to-Date > \$ 500	Date (month, day, year) 11-16-99	Amount of Each Receipt this Period \$ 500

SUBTOTAL of Receipts This Page (optional)

5250

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SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

MIKE PENCE COMMITTEE

A. Full Name, Mailing Address and ZIP Code JAMES R. QUIGG, JR. P.O. Box 697 RICHMOND, IN 47375 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer RICHMOND BAKING CO. Occupation PRESIDENT Aggregate Year-to-Date > \$1,000	Date (month, day, year) 12-15-99	Amount of Each Receipt this Period \$1,000
B. Full Name, Mailing Address and ZIP Code G. H. MALEY 4531 N. MERIDIAN INDIANAPOLIS, IN 46208 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer RETIRED Occupation Aggregate Year-to-Date > \$1,000	Date (month, day, year) 12-3-99	Amount of Each Receipt this Period \$1,000
C. Full Name, Mailing Address and ZIP Code GEORGE M. CURTIS III 8335 ARLSON FOUNTAIN TRAIL INDIANAPOLIS, IN 46250 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer LIBERTY FUND, INC. Occupation AMERICAN HISTORIAN Aggregate Year-to-Date > \$1,000	Date (month, day, year) 11-9-99	Amount of Each Receipt this Period \$1,000
D. Full Name, Mailing Address and ZIP Code R. DONALD BELL 4715 NO. NEBO RD. 400 WEST MUNCIE, IN 47304 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer RETIRED Occupation Aggregate Year-to-Date > \$500	Date (month, day, year) 11-10-99	Amount of Each Receipt this Period \$500
E. Full Name, Mailing Address and ZIP Code TOM C. HUSTON 4450 N. WASHINGTON BLVD. INDIANAPOLIS, IN 46205 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer BRENNICK DEVELOPMENT CO., INC. Occupation CHAIRMAN Aggregate Year-to-Date > \$500	Date (month, day, year) 11-9-99	Amount of Each Receipt this Period \$500
F. Full Name, Mailing Address and ZIP Code DOUGLAS C. ROSE 7453 N. CHESTER AVE. INDIANAPOLIS, IN 46240 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer IRWIN R. ROSE & CO., INC. Occupation INVESTMENTS/PROP. MGMT. Aggregate Year-to-Date > \$500	Date (month, day, year) 11-10-99	Amount of Each Receipt this Period \$500
G. Full Name, Mailing Address and ZIP Code WILLIAM R. NEALE 6340 N. EWING STREET INDIANAPOLIS, IN 46220 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer KRIEG DEVAULT ALEXANDER & CAPEHART, LL Occupation ATTORNEY Aggregate Year-to-Date > \$1,000	Date (month, day, year) 11-11-99	Amount of Each Receipt this Period \$1,000

SUBTOTAL of Receipts This Page (optional)

5500

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SCHEDULE A

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NAME OF COMMITTEE (in Full)

MIKE PENCE COMMITTEE

A. Full Name, Mailing Address and ZIP Code

JAMES ROBERT QUIGG III
6160 SUNSET LANE
INDIANAPOLIS, IN 46228

Name of Employer

ROHM AND BAK. CO.

Date (month,
day, year)

12-15-99

Amount of Each
Receipt this Period

\$ 1,000

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

C.F.O.

Aggregate Year-to-Date > \$ 1,000

B. Full Name, Mailing Address and ZIP Code

G. WILLIAM ARMSTRONG
12220 BROOKSHIRE PKWY.
CARMEL, IN 46033

Name of Employer

SELF

Date (month,
day, year)

12-18-99

Amount of Each
Receipt this Period

\$ 500

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

REAL ESTATE

Aggregate Year-to-Date > \$ 500

C. Full Name, Mailing Address and ZIP Code

ALONZO H. BOYD
P.O. Box 68
CAMBRIDGE CITY, IN 47327

Name of Employer

WAYNE BANK

Date (month,
day, year)

12-15-99

Amount of Each
Receipt this Period

\$ 1,000

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

BANKER

Aggregate Year-to-Date > \$ 1,000

D. Full Name, Mailing Address and ZIP Code

ANDRE B. LACY
54 MONUMENT CIRCLE
INDIANAPOLIS, IN 46204

Name of Employer

LDI, LTD.

Date (month,
day, year)

12-13-99

Amount of Each
Receipt this Period

\$ 500

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

CHAIRMAN, CEO

Aggregate Year-to-Date > \$ 500

E. Full Name, Mailing Address and ZIP Code

RONALD L. OBERLE
3201 N.W. B STREET
RICHMOND, IN 47374

Name of Employer

INFORMATION REQUESTED

Date (month,
day, year)

12-15-99

Amount of Each
Receipt this Period

\$ 1,000

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 1,000

F. Full Name, Mailing Address and ZIP Code

DR. DAVID K. HAVILAND
2208 WEST STOP ELEVEN ROAD
INDIANAPOLIS, IN 46217

Name of Employer

MERIDIAN VETERINARY
CLINIC, INC.Date (month,
day, year)

12-13-99

Amount of Each
Receipt this Period

\$ 500

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

VETERINARIAN

Aggregate Year-to-Date > \$ 500

G. Full Name, Mailing Address and ZIP Code

THOMAS RINGENBERG
2519 EAST MAIN ST., SUITE 112
RICHMOND, IN 47374

Name of Employer

SELF

Date (month,
day, year)

12-15-99

Amount of Each
Receipt this Period

\$ 750

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

DENTIST

Aggregate Year-to-Date > \$ 750

SUBTOTAL of Receipts This Page (optional)

5250

TOTAL This Period (last page this line number only)

SCHEDULE A

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NAME OF COMMITTEE (In Full)

MIKE PENCE COMMITTEE

A. Full Name, Mailing Address and ZIP Code PETER J. WICKMAN 3401 DEER PARK COURT RICHMOND, IN 47374 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer BELDEN, INC. Occupation OFFICER Aggregate Year-to-Date > \$1,000	Date (month, day, year) 11-28-99	Amount of Each Receipt this Period \$ 500
B. Full Name, Mailing Address and ZIP Code DONALD R. LASKOWSKI 7802 EAGLE CREEK OVERLOOK DRIVE INDIANAPOLIS, IN 46254 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer WOODMISER, INC. Occupation PRESIDENT Aggregate Year-to-Date > \$1,000	Date (month, day, year) 11-30-99	Amount of Each Receipt this Period \$ 1,000
C. Full Name, Mailing Address and ZIP Code JAMES C. MARCUCCI P.O. BOX 967 MARION, IN 46952 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer STAR FINANCIAL BANK Occupation BANKING Aggregate Year-to-Date > \$ 500	Date (month, day, year) 11-30-99	Amount of Each Receipt this Period \$ 500
D. Full Name, Mailing Address and ZIP Code FRED S. KLIPSCH 8900 KEYSTONE CROSSING, SUITE 1200 INDIANAPOLIS, IN 46240 Receipt For: ☒ Primary ☒ General ☐ Other (specify):	Name of Employer KLIPSCH LANHAM, INC. Occupation PRESIDENT Aggregate Year-to-Date > \$2,000	Date (month, day, year) 12-2-99	Amount of Each Receipt this Period \$ 1,000 - P \$ 1,000 - G
E. Full Name, Mailing Address and ZIP Code JUDY KLIPSCH 8900 KEYSTONE CROSSING, SUITE 1200 INDIANAPOLIS, IN 46240 Receipt For: ☒ Primary ☒ General ☐ Other (specify):	Name of Employer HOMEMAKER Occupation HOMEMAKER Aggregate Year-to-Date > \$2,000	Date (month, day, year) 12-2-99	Amount of Each Receipt this Period \$ 1,000 - P \$ 1,000 - G
F. Full Name, Mailing Address and ZIP Code PAULA M. KLIPSCH 14035 SPRINGMILL PONDS CIRCLE CARMEL, IN 46032 Receipt For: ☒ Primary ☒ General ☐ Other (specify):	Name of Employer HOMEMAKER Occupation HOMEMAKER Aggregate Year-to-Date > \$2,000	Date (month, day, year) 12-2-99	Amount of Each Receipt this Period \$ 1,000 - P \$ 1,000 - G
G. Full Name, Mailing Address and ZIP Code MICHAEL F. KLIPSCH 14035 SPRINGMILL PONDS CIRCLE CARMEL, IN 46032 Receipt For: ☒ Primary ☒ General ☐ Other (specify):	Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED Aggregate Year-to-Date > \$2,000	Date (month, day, year) 12-2-99	Amount of Each Receipt this Period \$ 1,000 - P \$ 1,000 - G

SUBTOTAL of Receipts This Page (optional)

10,000

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SCHEDULE A

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NAME OF COMMITTEE (in Full)

MIKE PENCE COMMITTEE

A. Full Name, Mailing Address and ZIP Code BRYAN W. POYNTER 6757 E. 171st STREET NOBLESVILLE, IN 46060 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer OLYMPIA PARTNERS Occupation REAL ESTATE BROKER Aggregate Year-to-Date > \$ 300	Date (month, day, year) 12-2-99	Amount of Each Receipt this Period \$ 300
B. Full Name, Mailing Address and ZIP Code RONALD D. HUNTER 3570 SEDGEMOOR CIRCLE CARMEL, IN 46032-9122 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer INFORMATION REQUESTED Occupation Aggregate Year-to-Date > \$ 250	Date (month, day, year) 12-2-99	Amount of Each Receipt this Period \$ 250
C. Full Name, Mailing Address and ZIP Code HOWARD HUBLER 8220 S. US 31 INDIANAPOLIS, IN 46227 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer HUBLER CHEVROLET Occupation PRESIDENT Aggregate Year-to-Date > \$ 2,000	Date (month, day, year) 11-29-99	Amount of Each Receipt this Period \$ 1,000
D. Full Name, Mailing Address and ZIP Code SANDRA C. HURT 8801 SARGENT ROAD INDIANAPOLIS, IN 46256 Receipt For: ☒ Primary ☒ General ☐ Other (specify):	Name of Employer HOMEMAKER Occupation Aggregate Year-to-Date > \$ 2,000	Date (month, day, year) 12-1-99	Amount of Each Receipt this Period \$ 1,000-P \$ 1,000-G
E. Full Name, Mailing Address and ZIP Code STAN C. HURT 8801 SARGENT ROAD INDIANAPOLIS, IN 46256 Receipt For: ☒ Primary ☒ General ☐ Other (specify):	Name of Employer INDIANA SUPPLY CO. Occupation CHAIRMAN Aggregate Year-to-Date > \$ 2,000	Date (month, day, year) 12-1-99	Amount of Each Receipt this Period \$ 1,000-P \$ 1,000-G
F. Full Name, Mailing Address and ZIP Code CHRIS DUFFY 7075 N. PENNSYLVANIA ST. INDIANAPOLIS, IN 46220 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer RETIRED Occupation Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 12-2-99	Amount of Each Receipt this Period \$ 1,000
G. Full Name, Mailing Address and ZIP Code GARY G. PEDIGO 6290 DEERFIELD DRIVE GREENWOOD, IN 46143 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer PEDIGO CHEVROLET Occupation PRESIDENT Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 11-30-99	Amount of Each Receipt this Period \$ 1,000

SUBTOTAL of Receipts This Page (optional)

7550

TOTAL This Period (last page this line number only)

SCHEDULE A

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NAME OF COMMITTEE (In Full)

MIKE PENCE COMMITTEE

A. Full Name, Mailing Address and ZIP Code

KATHRYN L. WILSON
7043 BEAUMONT COURT
ZIONSVILLE, IN 46077

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

INFORMATION REQUESTED

Occupation

Date (month,
day, year)

12-5-99

Amount of Each
Receipt this Period

\$1,000

Aggregate Year-to-Date > \$1,000

B. Full Name, Mailing Address and ZIP Code

ROBERT E. WILSON
7043 BEAUMONT COURT
ZIONSVILLE, IN 46077

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

INFORMATION REQUESTED

Occupation

Date (month,
day, year)

12-5-99

Amount of Each
Receipt this Period

\$1,000

Aggregate Year-to-Date > \$1,000

C. Full Name, Mailing Address and ZIP Code

THOMAS J. PENCE
1349 HELFORD LANE
CARMEL, IN 46032

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

CONSECO, INC.

Occupation

ASST. VICE-PRES.

Date (month,
day, year)

12-2-99

Amount of Each
Receipt this Period

\$1,000

Aggregate Year-to-Date > \$1,000

D. Full Name, Mailing Address and ZIP Code

JEFFREY T. LASKOWSKI
7258 N. SR 39
LITTON, IN 46149

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

WOODMISER, INC.

Occupation

EXECUTIVE

Date (month,
day, year)

11-29-99

Amount of Each
Receipt this Period

\$250

Aggregate Year-to-Date > \$250

E. Full Name, Mailing Address and ZIP Code

GARY A. HOFMEISTER
3809 E. 82ND STREET
INDIANAPOLIS, IN 46240

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

HOFMEISTER PERSONAL JEWELRY

Occupation

CHAIRMAN

Date (month,
day, year)

12-2-99

Amount of Each
Receipt this Period

\$1,000

Aggregate Year-to-Date > \$2,000

F. Full Name, Mailing Address and ZIP Code

JOHN M. WHELAN
6717 LA TOUR CIRCLE
INDIANAPOLIS, IN 46278

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

GOLDEN RULE INSURANCE CO.

Occupation

PRESIDENT

Date (month,
day, year)

11-29-99

Amount of Each
Receipt this Period

\$1,000

Aggregate Year-to-Date > \$1,000

G. Full Name, Mailing Address and ZIP Code

~~GARY A. HOFMEISTER~~
PETER H. LEONARD
3680 WOODSIDE DRIVE
COLUMBUS, IN 47203-1229

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

SELF

Occupation

DENTIST

Date (month,
day, year)

11-25-99

Amount of Each
Receipt this Period

\$1,000

Aggregate Year-to-Date > \$1,000

SUBTOTAL of Receipts This Page (optional)

6250

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SCHEDULE A

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NAME OF COMMITTEE (In Full)

MIKE PENCE COMMITTEE

A. Full Name, Mailing Address and ZIP Code

DR. BEN B. PENCE
2829 - 25TH STREET
COLUMBUS, IN 47203

Name of Employer

SELF

Date (month,
day, year)

11-12-99

Amount of Each
Receipt this Period

\$1,000

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

ORTHODONTIST

Aggregate Year-to-Date > \$1,000

B. Full Name, Mailing Address and ZIP Code

JOHN W. FISHER
P.O. BOX 1408
MUNCIE, IN 47308

Name of Employer

RETIRED

Date (month,
day, year)

11-12-99

Amount of Each
Receipt this Period

\$500

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$500

C. Full Name, Mailing Address and ZIP Code

JANICE BALL FISHER
P.O. BOX 1408
MUNCIE, IN 47308

Name of Employer

RETIRED

Date (month,
day, year)

11-12-99

Amount of Each
Receipt this Period

\$500

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$500

D. Full Name, Mailing Address and ZIP Code

JOSEPH S. DAWSON
7899 HIGH DRIVE
INDIANAPOLIS, IN 46240

Name of Employer

SELF

Date (month,
day, year)

11-11-99

Amount of Each
Receipt this Period

\$1,000

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$1,000

E. Full Name, Mailing Address and ZIP Code

WILLIAM H. GRUPPE
P.O. BOX 71
MUNCIE, IN 47308

Name of Employer

G&G OIL CO.
OF INDIANA, INC.Date (month,
day, year)

11-12-99

Amount of Each
Receipt this Period

\$250

Receipt For:

☐ Primary☒ General☐ Other (specify):

Occupation

PRESIDENT

Aggregate Year-to-Date > \$1,250

F. Full Name, Mailing Address and ZIP Code

EDMUND F. BALL
P.O. BOX 1408
MUNCIE, IN 47308

Name of Employer

RETIRED

Date (month,
day, year)

11-15-99

Amount of Each
Receipt this Period

\$500

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$500

G. Full Name, Mailing Address and ZIP Code

KENNETH D. HANSEN
6330 E. SOUTHPORT ROAD
INDIANAPOLIS, IN 46237

Name of Employer

HANSEN & HORN
GROUP, INC.Date (month,
day, year)

11-15-99

Amount of Each
Receipt this Period

\$300

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

HOME BUILDER

Aggregate Year-to-Date > \$300

SUBTOTAL of Receipts This Page (optional)

40.50

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 24 OF 27
FOR LINE NUMBER 11A

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)

MIKE PENCE COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ROBERT E. KERSEY 911 BRIAR ROAD MUNCIE, IN 47304	AMERICAN LAWN MOWER CO. Occupation: MANUFACTURER Aggregate Year-to-Date: \$2,000	11-22-99	\$1,000-P \$1,000-G
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JOHN W. CLEVELAND 1108 IVYWOOD COURT NEW CASTLE, IN 47362	CMH & ASSOCIATES Occupation: MFG. REP. Aggregate Year-to-Date: \$250	11-23-99	\$250
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DONALD C. DANIELSON 727 WELAND STREET NEW CASTLE, IN 47362	CITY SECURITIES Occupation: VICE CHAIRMAN OF BOARD Aggregate Year-to-Date: \$2,000	11-17-99	\$1,000
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
A. RAYMOND SCHWALLER 6733 PARK LANE PALOS HEIGHTS, IL 60463	SCHWALLER BROOKHAUS INSURANCE Occupation: INSURANCE AGENT Aggregate Year-to-Date: \$1,000	11-24-99	\$1,000
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
RICHARD W. JACKSON 6589 W. STONES CROSSING ROAD GREENWOOD, IN 46143	ASSOCIATED ORTHOPEDIC SURGEONS Occupation: PHYSICIAN Aggregate Year-to-Date: \$250	11-24-99	\$250
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BILL BUTTERFIELD 555 TENNIS LANE EVANSVILLE, IN 47715-2613	SELF Occupation: BUSINESS EXEC. Aggregate Year-to-Date: \$1,000	11-25-99	\$1,000
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DAVID C. LUCY 23 LAKESHORE COURT CARMEL, IN 46033	MED-AMERICA EQUIPMENT RETAILERS ASSOC. Occupation: ASSOC. / BUSINESS MGR. Aggregate Year-to-Date: \$1,000	11-30-99	\$1,000

SUBTOTAL of Receipts This Page (optional)

6500

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 25 OF 27
FOR LINE NUMBER 11A

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NAME OF COMMITTEE (In Full)

MIKE PEACE COMMITTEE

A. Full Name, Mailing Address and ZIP Code

DAVID M. KERR
621 WASHINGTON STREET
COLUMBUS, IN 47201

Name of Employer

KERR, MARBACH & CO.

Date (month,
day, year)

11-16-99

Amount of Each
Receipt this Period

\$ 1,000

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

INVESTMENT ADVISOR

Aggregate Year-to-Date > \$ 1,000

B. Full Name, Mailing Address and ZIP Code

JOSEPH O. RIEKE
3346 NOGENT BLVD.
COLUMBUS, IN 47203

Name of Employer

RETIRED

Date (month,
day, year)

11-15-99

Amount of Each
Receipt this Period

\$ 250

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 250

C. Full Name, Mailing Address and ZIP Code

LYNN BROWN
940 SHOREWOOD COURT
COLUMBUS, IN 47201

Name of Employer

HOMEMAKER

Date (month,
day, year)

11-15-99

Amount of Each
Receipt this Period

\$ 1,000

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 1,000

D. Full Name, Mailing Address and ZIP Code

DONALD M. PEREZ
141 WEST 22ND ST, JUTE 112
ANDERSON, IN 46016

Name of Employer

SELF

Date (month,
day, year)

11-17-99

Amount of Each
Receipt this Period

\$ 250

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

OPHTHALMOLOGIST

Aggregate Year-to-Date > \$ 500

E. Full Name, Mailing Address and ZIP Code

JEFFERY L. CARDWELL
3205 MADISON AVENUE
INDIANAPOLIS, IN 46227

Name of Employer

AMI DO-IT BEST

Date (month,
day, year)

11-15-99

Amount of Each
Receipt this Period

\$ 1,000

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

EXECUTIVE

Aggregate Year-to-Date > \$ 1,000

F. Full Name, Mailing Address and ZIP Code

JAMES K. RISK III
2113 SOUTH 6TH STREET
LAFAYETTE, IN 47905

Name of Employer

KIRBY RISK, INC.

Date (month,
day, year)

11-15-99

Amount of Each
Receipt this Period

\$ 300

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

CHAIRMAN

Aggregate Year-to-Date > \$ 300

G. Full Name, Mailing Address and ZIP Code

WILLIAM K. NASSER
10662 WINTERWOOD
CARMEL, IN 46032

Name of Employer

THE CARE GROUP

Date (month,
day, year)

11-17-99

Amount of Each
Receipt this Period

\$ 1,000

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

CARDIOLOGIST

Aggregate Year-to-Date > \$ 1,000

SUBTOTAL of Receipts This Page (optional)

4800

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 26 OF 27
FOR LINE NUMBER 11A

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NAME OF COMMITTEE (In Full)

MIKE PENCE COMMITTEE

A. Full Name, Mailing Address and ZIP Code

GEORGE N. MOSEY
1912 MORROW ROAD
RICHMOND, IN 47374

Name of Employer

MOSEY MFG. CO., INC.

Date (month,
day, year)

12-9-99

Amount of Each
Receipt this Period

\$500

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

ENGINEER

Aggregate Year-to-Date > \$1,000

B. Full Name, Mailing Address and ZIP Code

WAYNE R. NELSON
P.O. BOX 475
BRIDGMAN, MI 49106-0475

Name of Employer

INFORMATION REQUESTED

Date (month,
day, year)

12-2-99

Amount of Each
Receipt this Period

\$1,000

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$1,000

C. Full Name, Mailing Address and ZIP Code

MARILYN L. NELSON
P.O. BOX 475
BRIDGMAN, MI 49106-0475

Name of Employer

HOMEMAKER

Date (month,
day, year)

12-7-99

Amount of Each
Receipt this Period

\$1,000

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$1,000

D. Full Name, Mailing Address and ZIP Code

WILLIAM H. BALL, JR.
5225 NOB CANE
INDIANAPOLIS, IN 46226

Name of Employer

RETIRED

Date (month,
day, year)

12-3-99

Amount of Each
Receipt this Period

\$500

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$500

E. Full Name, Mailing Address and ZIP Code

ROBERT W. HADDAD
4345 N. RIVERSIDE DRIVE
COLUMBUS, IN 47203

Name of Employer

COLUMBUS CONTAINER,
INC.Date (month,
day, year)

12-10-99

Amount of Each
Receipt this Period

\$1,000

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

OWNER/PRES.

Aggregate Year-to-Date > \$1,000

F. Full Name, Mailing Address and ZIP Code

RICHARD L. JOHNSON JR.
9224 W. RAINTREE DR. SOUTH
COLUMBUS, IN 47201

Name of Employer

JOHNSON OIL CO.

Date (month,
day, year)

12-10-99

Amount of Each
Receipt this Period

\$250

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

PRESIDENT

Aggregate Year-to-Date > \$250

G. Full Name, Mailing Address and ZIP Code

DALE F. DOEHRMAN
P.O. BOX 2165
NAPLES, FL 34106

Name of Employer

RETIRED

Date (month,
day, year)

12-7-99

Amount of Each
Receipt this Period

\$250

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$250

SUBTOTAL of Receipts This Page (optional)

4500

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

MIKE PENCE COMMITTEE

A. Full Name, Mailing Address and ZIP Code WAYNE E. VINCENT P.O. Box 1464 RICHMOND, IN 47375 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer PLANNED BENEFIT SERVICES, INC. Occupation PRESIDENT, CLU Aggregate Year-to-Date > \$ 253.50	Date (month, day, year) 12-27-99	Amount of Each Receipt this Period \$ 253.50
B. Full Name, Mailing Address and ZIP Code WAYNE E. VINCENT P.O. Box 1464 RICHMOND, IN 47375 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer PLANNED BENEFIT SERVICES, INC. Occupation PRESIDENT, CLU Aggregate Year-to-Date > \$ 1003.50	Date (month, day, year) 12-15-99	Amount of Each Receipt this Period \$ 750.00
C. Full Name, Mailing Address and ZIP Code WAYNE E. VINCENT P.O. Box 1464 RICHMOND, IN 47375 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer PLANNED BENEFIT SERVICES, INC. Occupation PRESIDENT, CLU Aggregate Year-to-Date > \$ 1278.50	Date (month, day, year) 12-15-99	Amount of Each Receipt this Period \$ 275.00* *IN-KIND* FUNDRAISING LUNCHEON
D. Full Name, Mailing Address and ZIP Code KELLY N. STANLEY 2628 S. PARKWAY MUNCIE, IN 47304 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer HOMEMAKER Occupation HOMEMAKER Aggregate Year-to-Date > \$ 896.05	Date (month, day, year) 12-8-99	Amount of Each Receipt this Period \$ 896.05* *IN-KIND* FUNDRAISER
E. Full Name, Mailing Address and ZIP Code KELLY N. STANLEY 2628 S. PARKWAY MUNCIE, IN 47304 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer HOMEMAKER Occupation HOMEMAKER Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 12-22-99	Amount of Each Receipt this Period \$ 103.95
F. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

2278.50

TOTAL This Period (last page this line number only)

154367.13

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 1 OF 1
FOR LINE NUMBER 110

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NAME OF COMMITTEE (in Full)

MIKE PENCE COMMITTEE

A. Full Name, Mailing Address and ZIP Code

MIKE PENCE
228 SAINT ANDREWS AVENUE
EDINBURGH, IN 46124

Name of Employer

EMNIS COMMUNICATIONS

Date (month,
day, year)

8-30-99

Amount of Each
Receipt this Period

\$ 2,000

Occupation

BROADCASTER

Receipt For:

☒ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date > \$ 2,000

B. Full Name, Mailing Address and ZIP Code

MIKE PENCE
228 SAINT ANDREWS AVENUE
EDINBURGH, IN 46124

Name of Employer

EMNIS COMMUNICATIONS

Date (month,
day, year)

9-15-99

Amount of Each
Receipt this Period

\$ 500

Occupation

BROADCASTER

Receipt For:

☒ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date > \$ 2,500

C. Full Name, Mailing Address and ZIP Code

MIKE PENCE
228 SAINT ANDREWS AVENUE
EDINBURGH, IN 46124

Name of Employer

EMNIS COMMUNICATIONS

Date (month,
day, year)

9-16-99

Amount of Each
Receipt this Period

\$ 25

Occupation

BROADCASTER

Receipt For:

☒ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date > \$ 2,525

D. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date > \$

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date > \$

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date > \$

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date > \$

SUBTOTAL of Receipts This Page (optional)

\$ 2,525.00

TOTAL This Period (last page this line number only)

\$ 2,525.00

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 1 OF 1
FOR LINE NUMBER 12

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NAME OF COMMITTEE (In Full)

MIKE PENCE COMMITTEE

A. Full Name, Mailing Address and ZIP Code

THE PEOPLE FOR MIKE PENCE
1825 INISHEER COURT
INDIANAPOLIS, IN 46217

Name of Employer

TRANSFER OF SURPLUS
FUNDS FROM PREVIOUS

Occupation COMMITTEE

Date (month,
day, year)

11-2-99

Amount of Each
Receipt this Period

*283.10

Receipt For:

☒ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date > \$ 283.10

B. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date > \$

C. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date > \$

D. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date > \$

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date > \$

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date > \$

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date > \$

SUBTOTAL of Receipts This Page (optional)

*283.10

TOTAL This Period (last page this line number only)

*283.10

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 1 OF 1
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

MIKE PENCE COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
OPINION RESEARCH & EVALUATION, INC. 11532 SEAFAN COURT INDIANAPOLIS, IN 46236	DISTRICT POLL Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	9-3-99	\$ 3,750.00
OPINION RESEARCH & EVALUATION, INC. 11532 SEAFAN COURT INDIANAPOLIS, IN 46236	DISTRICT POLL Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	9-15-99	\$ 3,750.00
ROSS & BABCOCK TRAVEL 120 MONUMENT CIRCLE, SUITE 105 INDIANAPOLIS, IN 46204	TRAVEL EXPENSE Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	9-27-99	\$ 924.18
KELLY N. STANLEY 2628 S. PARKWAY MUNCIE, IN 47304	IN-KIND FUNDRAISER Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	12-8-99	\$ 896.05 * * IN-KIND
WAYNE E. VINCENT P.O. BOX 1464 RICHMOND, IN 47375	IN-KIND FUNDRAISER Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	12-15-99	\$ 275.00 * * IN-KIND
VENDORS NOT REQUIRING ITEMIZATION	CAMPAIGN EXPENSES Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	THRU 12-31-99	\$ 99.05
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

\$ 9,694.28

TOTAL This Period (last page this line number only)

\$ 9,694.28

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 1 of 1 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
MIKE PENCE COMMITTEE				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor ACTS, INC. 1802 W. 17TH STREET, SUITE A BLOOMINGTON, IN 47404	X	\$1,000	X	\$1,000
Nature of Debt (Purpose): CONSULTING FEE-TECHNICAL SUPPORT				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor HAMMOND & ASSOCIATES 801 NORTH PITT STREET SUITE 120 ALEXANDRIA, VA 22314	X	\$1,300	X	\$1,300
Nature of Debt (Purpose): CONSULTING FEES-FUNDRAISING				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				\$2,300
2) TOTALS This Period (last page in this line only)				\$2,300
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				X
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				\$2,300

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

☐ Hand Delivered	Date of Receipt
☐ First Class Mail	POSTMARKED
☒ Registered/Certified Mail	POSTMARKED 1/31/00
☐ No Postmark	
☐ Postmark Illegible	
☐ Received from the House office of Records and Registration	Date of Receipt
☐ Received from the Senate Office of Public Records	Date of Receipt
☐ Other (Specify):	Postmarked and/or Date of Receipt
☐ Electronic Filing	
 PREPARER	2/7/00 DATE PREPARED