



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Ice Miller PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>	<input type="text" value="20908.97"/>	<input type="text" value="20908.97"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="20908.97"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="39678.25"/>	<input type="text" value="39678.25"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="60587.22"/>	<input type="text" value="60587.22"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="11844.39"/>	<input type="text" value="11844.39"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="48742.83"/>	<input type="text" value="48742.83"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**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

Write or Type Committee Name

**Ice Miller PAC**

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

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 (use Schedule A).....	34940.22	34940.22
(ii) Unitemized .....	4738.03	4738.03
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	39678.25	39678.25
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	39678.25	39678.25
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	39678.25	39678.25
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	39678.25	39678.25

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	94.39	94.39
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	94.39	94.39
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	11750.00	11750.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	11844.39	11844.39
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11844.39	11844.39

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	39678.25	39678.25
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	39678.25	39678.25
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	94.39	94.39
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	94.39	94.39

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 40
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

Full Name (Last, First, Middle Initial) <b>A. Mr. Anthony Aaron</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2013
Mailing Address One American Square Suite 2900		Transaction ID : SA11AI.4978
City Indianapolis	State IN	Zip Code 46282-0200
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.02
Name of Employer Ice Miller LLP	Occupation Attorney	\$41.67 monthly: 1/8; 2/7; 3/7; 4/5; 5/7; 6/7
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.02	

Full Name (Last, First, Middle Initial) <b>B. Mr. Wayne O. Adams III</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2013
Mailing Address One American Square Suite 2900		Transaction ID : SA11AI.4979
City Indianapolis	State IN	Zip Code 46282-0200
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.04
Name of Employer Ice Miller LLP	Occupation Attorney	\$83.34 monthly: 1/8; 2/7; 3/7; 4/5; 5/7; 6/7
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.04	

Full Name (Last, First, Middle Initial) <b>C. Bruce Agin</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2013
Mailing Address 200 W. Madison Street Suite 3500		Transaction ID : SA11AI.4980
City Chicago	State IL	Zip Code 60606
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.04
Name of Employer Ice Miller LLP	Occupation Attorney	\$83.34 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.04	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1250.10
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 40
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Ice Miller PAC**

Full Name (Last, First, Middle Initial) <b>A. Kevin M. Alerding</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2013 <b>Transaction ID : SA11AI.4981</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 252.00 \$42.00 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7
City Indianapolis	State IN	Zip Code 46282-0200
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 252.00
Name of Employer Ice Miller LLP	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Adam Arceneaux</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2013 <b>Transaction ID : SA11AI.4984</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 500.04 \$83.34 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7
City Indianapolis	State IN	Zip Code 46282-0200
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 500.04
Name of Employer Ice Miller LLP	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Randall Arndt</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2013 <b>Transaction ID : SA11AI.4985</b>
Mailing Address 250 West Street		Amount of Each Receipt this Period 250.02 \$41.67 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7
City Columbus	State OH	Zip Code 43215
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 250.02
Name of Employer Ice Miller LLP	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1002.06
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 40
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. William Barath**  
Full Name (Last, First, Middle Initial)  
Mailing Address 250 West Street  
City Columbus State OH Zip Code 43215  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Ice Miller LLP Occupation Attorney  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.02

Date of Receipt 06 / 30 / 2013  
**Transaction ID : SA11AI.4988**  
Amount of Each Receipt this Period 250.02  
\$41.67 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**B. Phillip L. Bayt**  
Full Name (Last, First, Middle Initial)  
Mailing Address One American Square Suite 2900  
City Indianapolis State IN Zip Code 46282-0200  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Ice Miller LLP Occupation Attorney  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.04

Date of Receipt 06 / 30 / 2013  
**Transaction ID : SA11AI.4989**  
Amount of Each Receipt this Period 500.04  
\$83.34 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**C. Paul Bittner**  
Full Name (Last, First, Middle Initial)  
Mailing Address 250 West Street  
City Columbus State OH Zip Code 43215  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Ice Miller LLP Occupation Attorney  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.04

Date of Receipt 06 / 30 / 2013  
**Transaction ID : SA11AI.4990**  
Amount of Each Receipt this Period 500.04  
\$83.34 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1250.10  
**TOTAL** This Period (last page this line number only)..... ▶



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

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

FOR LINE NUMBER: PAGE 9 OF 40  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial)  
**A. Michael Blickman**

Mailing Address One American Square  
Suite 2900

City State Zip Code  
Indianapolis IN 46282-0200

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

Name of Employer Occupation  
Ice Miller LLP Attorney

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.04

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2013  
**Transaction ID : SA11AI.4991**

Amount of Each Receipt this Period  
500.04

\$83.34 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

Full Name (Last, First, Middle Initial)  
**B. Michael Boldt**

Mailing Address One American Square  
Suite 2900

City State Zip Code  
Indianapolis IN 46282-0200

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

Name of Employer Occupation  
Ice Miller LLP Attorney

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.04

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2013  
**Transaction ID : SA11AI.4992**

Amount of Each Receipt this Period  
500.04

\$83.34 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

Full Name (Last, First, Middle Initial)  
**C. Kristine Bouaichi**

Mailing Address One American Square  
Suite 2900

City State Zip Code  
Indianapolis IN 46282-0200

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

Name of Employer Occupation  
Ice Miller LLP Attorney

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.02

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2013  
**Transaction ID : SA11AI.4993**

Amount of Each Receipt this Period  
250.02

\$41.67 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1250.10

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 40
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Mary Beth Braitman**  
Full Name (Last, First, Middle Initial)

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282-0200

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.04

Date of Receipt  
06 / 30 / 2013  
**Transaction ID : SA11AI.4994**

Amount of Each Receipt this Period  
500.04  
\$83.34 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**B. Jenifer Brown**  
Full Name (Last, First, Middle Initial)

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282-0200

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.02

Date of Receipt  
06 / 30 / 2013  
**Transaction ID : SA11AI.4995**

Amount of Each Receipt this Period  
250.02  
\$41.67 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**C. Michael Buker**  
Full Name (Last, First, Middle Initial)

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282-0200

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.02

Date of Receipt  
06 / 30 / 2013  
**Transaction ID : SA11AI.4996**

Amount of Each Receipt this Period  
250.02  
\$41.67 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1000.08

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

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

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

FOR LINE NUMBER: PAGE 11 OF 40  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial)  
**A. John Burke**

Mailing Address 200 W. Madison Street  
Suite 3500

City Chicago State IL Zip Code 60606

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.04

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11AI.4997**

Amount of Each Receipt this Period  
500.04

\$83.34 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

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

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282-0200

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.04

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11AI.4999**

Amount of Each Receipt this Period  
500.04

\$83.34 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

Full Name (Last, First, Middle Initial)  
**C. Brian Crist**

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282-0200

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.02

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11AI.5001**

Amount of Each Receipt this Period  
250.02

\$41.67 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1250.10

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 40
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Terri A. Czajka**  
Full Name (Last, First, Middle Initial)

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282-0200

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.04

Date of Receipt  
06 / 30 / 2013  
Transaction ID : SA11AI.5004

Amount of Each Receipt this Period  
500.04  
\$83.34 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**B. Gary Dankert**  
Full Name (Last, First, Middle Initial)

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282-0200

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.04

Date of Receipt  
06 / 30 / 2013  
Transaction ID : SA11AI.5006

Amount of Each Receipt this Period  
500.04  
\$83.34 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**C. Kristine Danz**  
Full Name (Last, First, Middle Initial)

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282-0200

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.02

Date of Receipt  
06 / 30 / 2013  
Transaction ID : SA11AI.5007

Amount of Each Receipt this Period  
250.02  
\$41.67 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1250.10

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

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

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

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

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

**A. James Davidson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 250 West Street  
 City Columbus State OH Zip Code 43215  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Ice Miller LLP Occupation Attorney  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **500.04**

Date of Receipt **06 / 30 / 2013**  
**Transaction ID : SA11AI.5008**  
 Amount of Each Receipt this Period **500.04**  
 \$83.34 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**B. Joseph E. DeGroff**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One American Square Suite 2900  
 City Indianapolis State IN Zip Code 46282-0200  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Ice Miller LLP Occupation Attorney  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **500.04**

Date of Receipt **06 / 30 / 2013**  
**Transaction ID : SA11AI.5009**  
 Amount of Each Receipt this Period **500.04**  
 \$83.34 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**C. Thomas Dimond**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 200 W. Madison Street Suite 3500  
 City Chicago State IL Zip Code 60606-3417  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Ice Miller LLP Occupation Attorney  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.08**

Date of Receipt **06 / 30 / 2013**  
**Transaction ID : SA11AI.5012**  
 Amount of Each Receipt this Period **250.08**  
 \$20.84 twice monthly - 1/15; 1/31; 2/15; 2/28; 3/15; 3/29; 4/15; 4/30; 5/15; 5/31; 6/14; 6/28

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1250.16</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 40
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. Aaron J. Dixon**  
Full Name (Last, First, Middle Initial)

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282-0200

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.02

Date of Receipt  
06 / 30 / 2013  
Transaction ID : SA11AI.5013

Amount of Each Receipt this Period  
250.02  
\$41.67 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**B. Gregory Dunn**  
Full Name (Last, First, Middle Initial)

Mailing Address 250 West Street

City Columbus State OH Zip Code 43215

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.02

Date of Receipt  
06 / 30 / 2013  
Transaction ID : SA11AI.5014

Amount of Each Receipt this Period  
250.02  
\$41.67 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**C. Tamatha A. Earnhart**  
Full Name (Last, First, Middle Initial)

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282-0200

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.02

Date of Receipt  
06 / 30 / 2013  
Transaction ID : SA11AI.5015

Amount of Each Receipt this Period  
250.02  
\$41.67 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 750.06

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 40
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Henry Efroymsen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One American Square  
 Suite 2900  
 City Indianapolis State IN Zip Code 46282-0200  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Ice Miller LLP Occupation Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt  
 06 / 30 / 2013  
**Transaction ID : SA11AI.5016**  
 Amount of Each Receipt this Period  
 500.04  
 \$83.34 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**B. Mark Ford**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One American Square  
 Suite 2900  
 City Indianapolis State IN Zip Code 46282-0200  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Ice Miller LLP Occupation Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt  
 06 / 30 / 2013  
**Transaction ID : SA11AI.5017**  
 Amount of Each Receipt this Period  
 500.04  
 \$83.34 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**C. Matthew Fornshell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 250 West Street  
 City Columbus State OH Zip Code 43215  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Ice Miller LLP Occupation Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt  
 06 / 30 / 2013  
**Transaction ID : SA11AI.5019**  
 Amount of Each Receipt this Period  
 250.02  
 \$41.67 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1250.10
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 40
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Ice Miller PAC**

**A. Sarah Funke**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One American Square  
 Suite 2900  
 City Indianapolis State IN Zip Code 46282-0200  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Ice Miller LLP Occupation Attorney  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.02**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2013  
**Transaction ID : SA11AI.5021**  
 Amount of Each Receipt this Period  
**250.02**  
 \$41.67 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**B. Bonnie Gallivan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One American Square  
 Suite 2900  
 City Indianapolis State IN Zip Code 46282-0200  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Ice Miller LLP Occupation Attorney  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **500.04**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2013  
**Transaction ID : SA11AI.5022**  
 Amount of Each Receipt this Period  
**500.04**  
 \$83.34 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**C. Robert Gauss**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One American Square  
 Suite 2900  
 City Indianapolis State IN Zip Code 46282-0200  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Ice Miller LLP Occupation Attorney  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **450.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2013  
**Transaction ID : SA11AI.5024**  
 Amount of Each Receipt this Period  
**450.00**  
 \$75.00 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1200.06</b>
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 40
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. John Gilligan**  
Full Name (Last, First, Middle Initial)

Mailing Address 250 West Street

City Columbus State OH Zip Code 43215

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

Name of Employer Ice Miller LLLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.02

Date of Receipt 06 / 30 / 2013  
Transaction ID : SA11AI.5027

Amount of Each Receipt this Period 250.02

\$41.67 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**B. Harry Gonso**  
Full Name (Last, First, Middle Initial)

Mailing Address One American Square Suite 2900

City Indianapolis State IN Zip Code 46282-0200

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.04

Date of Receipt 06 / 30 / 2013  
Transaction ID : SA11AI.5032

Amount of Each Receipt this Period 500.04

\$83.34 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**C. John R. Hammond III**  
Full Name (Last, First, Middle Initial)

Mailing Address One American Square Suite 2900

City Indianapolis State IN Zip Code 46282-0200

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.04

Date of Receipt 06 / 30 / 2013  
Transaction ID : SA11AI.5034

Amount of Each Receipt this Period 500.04

\$83.34 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**SUBTOTAL** of Receipts This Page (optional).....▶ 1250.10

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 40
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial)  
**A. Melanie Harris**

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282-0200

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.02

Date of Receipt  
06 / 30 / 2013  
**Transaction ID : SA11AI.5035**

Amount of Each Receipt this Period  
250.02  
\$41.67 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

Full Name (Last, First, Middle Initial)  
**B. Philip Hartmann**

Mailing Address 250 West Street

City Columbus State OH Zip Code 43215

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.02

Date of Receipt  
06 / 30 / 2013  
**Transaction ID : SA11AI.5036**

Amount of Each Receipt this Period  
250.02  
\$41.67 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

Full Name (Last, First, Middle Initial)  
**C. Jane Herndon**

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282-0200

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.04

Date of Receipt  
06 / 30 / 2013  
**Transaction ID : SA11AI.5037**

Amount of Each Receipt this Period  
500.04  
\$83.34 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.08
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 40
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. David Hight**  
Full Name (Last, First, Middle Initial)

Mailing Address 2300 Cabot Drive  
Suite 455

City State Zip Code  
Lisle IL 60532

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

Name of Employer Occupation  
Ice Miller LLP Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.02

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2013

**Transaction ID : SA11AI.5038**

Amount of Each Receipt this Period  
250.02

\$41.67 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**B. Richard Holz**  
Full Name (Last, First, Middle Initial)

Mailing Address 250 West Street

City State Zip Code  
Columbus OH 43215

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

Name of Employer Occupation  
Ice Miller LLP Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.02

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2013

**Transaction ID : SA11AI.5039**

Amount of Each Receipt this Period  
250.02

\$41.67 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**C. Mitchell Hopwood**  
Full Name (Last, First, Middle Initial)

Mailing Address One American Square  
Suite 2900

City State Zip Code  
Indianapolis IN 46282

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

Name of Employer Occupation  
Ice Miller LLP Chief Operating Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.08

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2013

**Transaction ID : SA11AI.5041**

Amount of Each Receipt this Period  
250.08

\$20.84 twice monthly - 1/15; 1/31; 2/15; 2/28; 3/15; 3/29; 4/15; 4/30; 5/15; 5/31; 6/14; 6/28

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.12
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 40
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Steven K. Humke**  
Full Name (Last, First, Middle Initial)

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282-0200

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  
06 / 30 / 2013  
Transaction ID : SA11AI.5042

Amount of Each Receipt this Period  
750.00  
\$125.00 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**B. Paul Jones**  
Full Name (Last, First, Middle Initial)

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282-0200

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
252.00

Date of Receipt  
06 / 30 / 2013  
Transaction ID : SA11AI.5044

Amount of Each Receipt this Period  
252.00  
\$42.00 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**C. Michael Jordan**  
Full Name (Last, First, Middle Initial)

Mailing Address 250 West Street

City Columbus State OH Zip Code 43215

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.02

Date of Receipt  
06 / 30 / 2013  
Transaction ID : SA11AI.5046

Amount of Each Receipt this Period  
250.02  
\$41.67 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1252.02
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 40
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Kevin R. Knight**  
Full Name (Last, First, Middle Initial)

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282-0200

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
06 / 30 / 2013  
**Transaction ID : SA11AI.5048**

Amount of Each Receipt this Period  
240.00  
\$40.00 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**B. Lisa Lee**  
Full Name (Last, First, Middle Initial)

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.02

Date of Receipt  
06 / 30 / 2013  
**Transaction ID : SA11AI.5051**

Amount of Each Receipt this Period  
250.02  
\$41.67 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**C. Jeffrey Lewis**  
Full Name (Last, First, Middle Initial)

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.04

Date of Receipt  
06 / 30 / 2013  
**Transaction ID : SA11AI.5053**

Amount of Each Receipt this Period  
500.04  
\$83.34 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 990.06

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 40
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Michael Melliere**  
Full Name (Last, First, Middle Initial)

Mailing Address 250 West Street

City Columbus State OH Zip Code 43215

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
06 / 30 / 2013  
Transaction ID : SA11AI.5056

Amount of Each Receipt this Period  
600.00  
\$100.00 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**B. Michael Millikan**  
Full Name (Last, First, Middle Initial)

Mailing Address One American Square Suite 2900

City Indianapolis State IN Zip Code 46282

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.02

Date of Receipt  
06 / 30 / 2013  
Transaction ID : SA11AI.5058

Amount of Each Receipt this Period  
250.02  
\$41.67 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**C. Andrew J. Miroff**  
Full Name (Last, First, Middle Initial)

Mailing Address One American Square Suite 2900

City Indianapolis State IN Zip Code 46282

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.02

Date of Receipt  
06 / 30 / 2013  
Transaction ID : SA11AI.5059

Amount of Each Receipt this Period  
250.02  
\$41.67 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1100.04

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 40
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Terry Mumford**  
Full Name (Last, First, Middle Initial)

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
06 / 30 / 2013  
Transaction ID : SA11AI.5060

Amount of Each Receipt this Period  
600.00  
\$100.00 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**B. Anthony Nimmo**  
Full Name (Last, First, Middle Initial)

Mailing Address 200 West Madison Street  
Suite 3500

City Chicago State IL Zip Code 60606

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.04

Date of Receipt  
06 / 30 / 2013  
Transaction ID : SA11AI.5063

Amount of Each Receipt this Period  
500.04  
\$83.34 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**c. John Oberle**  
Full Name (Last, First, Middle Initial)

Mailing Address 250 West Street

City Columbus State OH Zip Code 43215

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.02

Date of Receipt  
06 / 30 / 2013  
Transaction ID : SA11AI.5064

Amount of Each Receipt this Period  
250.02  
\$41.67 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1350.06

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 40
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.02

Date of Receipt  
06 / 30 / 2013  
Transaction ID : SA11AI.5065

Amount of Each Receipt this Period  
250.02  
\$41.67 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**B. Judith Okenfuss**  
Full Name (Last, First, Middle Initial)

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.04

Date of Receipt  
06 / 30 / 2013  
Transaction ID : SA11AI.5066

Amount of Each Receipt this Period  
500.04  
\$83.34 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

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

Mailing Address 250 West Street

City Columbus State OH Zip Code 43215

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

Name of Employer Ice Miller LLLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.04

Date of Receipt  
06 / 30 / 2013  
Transaction ID : SA11AI.5067

Amount of Each Receipt this Period  
500.04  
\$83.34 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**SUBTOTAL** of Receipts This Page (optional).....▶ 1250.10

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 40
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial)  
**A. Gregory Pemberton**

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.02

Date of Receipt  
06 / 30 / 2013  
**Transaction ID : SA11AI.5069**

Amount of Each Receipt this Period  
250.02  
\$41.67 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

Full Name (Last, First, Middle Initial)  
**B. Todd Ponder**

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.02

Date of Receipt  
06 / 30 / 2013  
**Transaction ID : SA11AI.5070**

Amount of Each Receipt this Period  
250.02  
\$41.67 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

Full Name (Last, First, Middle Initial)  
**C. Ryan McCabe Poor**

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.02

Date of Receipt  
06 / 30 / 2013  
**Transaction ID : SA11AI.5071**

Amount of Each Receipt this Period  
250.02  
\$41.67 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 750.06

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 40
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Ice Miller PAC**

Full Name (Last, First, Middle Initial)  
**A. Susan Porter**

Mailing Address 250 West Street

City Columbus	State OH	Zip Code 43215
------------------	-------------	-------------------

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

Name of Employer Ice Miller LLP	Occupation Attorney
------------------------------------	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.02

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11AI.5072**

Amount of Each Receipt this Period  
250.02

\$41.67 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

Full Name (Last, First, Middle Initial)  
**B. Victoria Powers**

Mailing Address 250 West Street

City Columbus	State OH	Zip Code 43215
------------------	-------------	-------------------

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

Name of Employer Ice Miller LLP	Occupation Attorney
------------------------------------	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
375.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11AI.5073**

Amount of Each Receipt this Period  
375.00

\$62.50 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

Full Name (Last, First, Middle Initial)  
**C. Deborah Pryce**

Mailing Address 250 West Street

City Columbus	State OH	Zip Code 43215
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FEC ID number of contributing federal political committee. **C**

Name of Employer Ice Miller LLP	Occupation Attorney
------------------------------------	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.08

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11AI.5074**

Amount of Each Receipt this Period  
250.08

\$20.84 twice monthly - 1/15; 1/31; 2/15; 2/28; 3/15; 3/29; 4/15; 4/30; 5/15; 5/31; 6/14; 6/28

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	875.10
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 40
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 250 West Street

City Columbus State OH Zip Code 43215

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.02

Date of Receipt  
06 / 30 / 2013  
Transaction ID : SA11AI.5077

Amount of Each Receipt this Period  
250.02  
\$41.67 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**B. Stephen Samuels**  
Full Name (Last, First, Middle Initial)

Mailing Address 250 West Street

City Columbus State OH Zip Code 43215

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.02

Date of Receipt  
06 / 30 / 2013  
Transaction ID : SA11AI.5081

Amount of Each Receipt this Period  
250.02  
\$41.67 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**C. Phillip Scaletta**  
Full Name (Last, First, Middle Initial)

Mailing Address One American Square Suite 2900

City Indianapolis State IN Zip Code 46282

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.04

Date of Receipt  
06 / 30 / 2013  
Transaction ID : SA11AI.5082

Amount of Each Receipt this Period  
500.04  
\$83.34 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1000.08

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 40
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Ice Miller PAC**

Full Name (Last, First, Middle Initial)  
**A. Robert Schillerstrom**

Mailing Address 2300 Cabot Drive  
Suite 455

City Lisle State IL Zip Code 60532

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.02

Date of Receipt  
06 / 30 / 2013  
**Transaction ID : SA11AI.5083**

Amount of Each Receipt this Period  
250.02  
\$41.67 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

Full Name (Last, First, Middle Initial)  
**B. Thomas F. Schnellenberger**

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.04

Date of Receipt  
06 / 30 / 2013  
**Transaction ID : SA11AI.5084**

Amount of Each Receipt this Period  
500.04  
\$83.34 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

Full Name (Last, First, Middle Initial)  
**C. Marc W. Sciscoe**

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.04

Date of Receipt  
06 / 30 / 2013  
**Transaction ID : SA11AI.5085**

Amount of Each Receipt this Period  
500.04  
\$83.34 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1250.10

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 40
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Date of Receipt 06 / 30 / 2013  
**Transaction ID : SA11AI.5086**  
 Amount of Each Receipt this Period 250.02  
 \$41.67 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

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

Date of Receipt 06 / 30 / 2013  
**Transaction ID : SA11AI.5087**  
 Amount of Each Receipt this Period 500.04  
 \$83.34 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

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

Date of Receipt 06 / 30 / 2013  
**Transaction ID : SA11AI.5088**  
 Amount of Each Receipt this Period 250.02  
 \$41.67 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.08
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 40
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Ice Miller PAC**

Full Name (Last, First, Middle Initial) <b>A. Tiffany Sharpley</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2013 <b>Transaction ID : SA11AI.5090</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 300.00
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		\$50.00 twice monthly - 1/15; 1/31; 2/15; 2/28; 3/15; 3/29; 4/15; 4/30; 5/15; 5/31; 6/14; 6/28
Name of Employer Ice Miller LLP	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. Mark I. Shublak</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2013 <b>Transaction ID : SA11AI.5091</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 500.04
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		\$83.34 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7
Name of Employer Ice Miller LLP	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.04	

Full Name (Last, First, Middle Initial) <b>C. Richard Smikle</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2013 <b>Transaction ID : SA11AI.5093</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 500.04
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		\$83.34 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7
Name of Employer Ice Miller LLP	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.04	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1300.08
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 40
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Stephen Smith Sr.**  
Full Name (Last, First, Middle Initial)

Mailing Address 250 West Street

City Columbus State OH Zip Code 43215

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
416.70

Date of Receipt  
06 / 30 / 2013  
Transaction ID : SA11AI.5095

Amount of Each Receipt this Period  
416.70

\$41.67 twice monthly - 1/15; 1/31; 2/15; 2/28; 3/15; 3/29; 4/15; 4/30; 5/15; 5/31; 6/14; 6/28

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

Mailing Address One American Square Suite 2900

City Indianapolis State IN Zip Code 46282

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.04

Date of Receipt  
06 / 30 / 2013  
Transaction ID : SA11AI.5096

Amount of Each Receipt this Period  
500.04

\$83.34 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

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

Mailing Address 2300 Cabot Drive Suite 455

City Lisle State IL Zip Code 60532

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.04

Date of Receipt  
06 / 30 / 2013  
Transaction ID : SA11AI.5098

Amount of Each Receipt this Period  
500.04

\$83.34 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1416.78

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 40
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. Dale Stackhouse**  
Full Name (Last, First, Middle Initial)

Mailing Address One American Square  
Sutie 2900

City Indianapolis State IN Zip Code 46282

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.04

Date of Receipt  
06 / 30 / 2013  
**Transaction ID : SA11AI.5100**

Amount of Each Receipt this Period  
500.04  
\$83.34 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**B. Alan Starkhoff**  
Full Name (Last, First, Middle Initial)

Mailing Address 250 West Street

City Columbus State OH Zip Code 43215

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.04

Date of Receipt  
06 / 30 / 2013  
**Transaction ID : SA11AI.5101**

Amount of Each Receipt this Period  
500.04  
\$83.35 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

**C. Daniel Swetnam**  
Full Name (Last, First, Middle Initial)

Mailing Address 250 West Street

City Columbus State OH Zip Code 43215

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.02

Date of Receipt  
06 / 30 / 2013  
**Transaction ID : SA11AI.5102**

Amount of Each Receipt this Period  
250.02  
\$41.67 monthly - 1/7; 2/7; 3/7; 4/5; 5/7; 6/7

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1250.10

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 40
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. John A. Thomas**  
Full Name (Last, First, Middle Initial)

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282-0200

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.02

Date of Receipt  
06 / 30 / 2013  
Transaction ID : SA11AI.5043

Amount of Each Receipt this Period  
250.02  
\$41.67 monthly - 1/8; 2/7; 3/7; 4/5; 5/7; 6/7

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

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.04

Date of Receipt  
06 / 30 / 2013  
Transaction ID : SA11AI.5103

Amount of Each Receipt this Period  
500.04  
\$83.34 monthly - 1/7; 2/7; 3/7; 4/5; 5/7; 6/7

**C. Richard Thrapp**  
Full Name (Last, First, Middle Initial)

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
06 / 30 / 2013  
Transaction ID : SA11AI.5104

Amount of Each Receipt this Period  
600.00  
\$100.00 monthly - 1/7; 2/7; 3/7; 4/5; 5/7; 6/7

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1350.06

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 34 OF 40
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. Michael Tooley**  
Full Name (Last, First, Middle Initial)

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.04

Date of Receipt  
06 / 30 / 2013  
Transaction ID : SA11AI.5105

Amount of Each Receipt this Period  
500.04  
\$83.34 monthly - 1/7; 2/7; 3/7; 4/5; 5/7; 6/7

**B. Felix Wade**  
Full Name (Last, First, Middle Initial)

Mailing Address 250 West Street

City Columbus State OH Zip Code 43215

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.04

Date of Receipt  
06 / 30 / 2013  
Transaction ID : SA11AI.5107

Amount of Each Receipt this Period  
500.04  
\$83.34 monthly - 1/7; 2/7; 3/7; 4/5; 5/7; 6/7

**C. Zeff Weiss**  
Full Name (Last, First, Middle Initial)

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.04

Date of Receipt  
06 / 30 / 2013  
Transaction ID : SA11AI.5110

Amount of Each Receipt this Period  
500.04  
\$83.34 monthly - 1/7; 2/7; 3/7; 4/5; 5/7; 6/7

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1500.12
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 40
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Alan Whaley</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2013 <b>Transaction ID : SA11AI.5111</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 252.00 \$42.00 monthly - 1/7; 2/7; 3/7; 4/5; 5/7; 6/7
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		
Name of Employer Ice Miller LLP	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	

Full Name (Last, First, Middle Initial) <b>B. Philip Whistler</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2013 <b>Transaction ID : SA11AI.5112</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 500.04 \$83.34 monthly - 1/7; 2/7; 3/7; 4/5; 5/7; 6/7
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		
Name of Employer Ice Miller LLP	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.04	

Full Name (Last, First, Middle Initial) <b>C. Katherine A. Winchester</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2013 <b>Transaction ID : SA11AI.5113</b>
Mailing Address One American Square Suite 2900		Amount of Each Receipt this Period 250.02 \$41.67 monthly - 1/7; 2/7; 3/7; 4/5; 5/7; 6/7
City Indianapolis	State IN	Zip Code 46282
FEC ID number of contributing federal political committee. C		
Name of Employer Ice Miller LLP	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.02	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1002.06
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 36 OF 40  
(check only one)

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

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

Full Name (Last, First, Middle Initial)  
**A. Michael Wukmer**

Mailing Address One American Square  
Suite 2900

City Indianapolis State IN Zip Code 46282

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

Name of Employer Ice Miller LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2013

**Transaction ID : SA11AI.5116**

Amount of Each Receipt this Period  
600.00

\$100.00 monthly - 1/7; 2/7; 3/7; 4/5; 5/7; 6/7

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	34940.22

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

**A. COLLINS FOR SENATOR**

Mailing Address PO BOX 1096

City BANGOR State ME Zip Code 04402

Purpose of Disbursement contribution

011

Candidate Name

**SUSAN M COLLINS**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: ME District: 00

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
04 / 17 / 2013

Transaction ID : **SB23.5162**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF JACK KINGSTON**

Mailing Address PO BOX 2133

City SAVANNAH State GA Zip Code 31402

Purpose of Disbursement contribution

011

Candidate Name

**JACK REP. KINGSTON**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: GA District: 01

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
04 / 17 / 2013

Transaction ID : **SB23.5131**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF ROY BLUNT**

Mailing Address PO BOX 10178

City COLUMBIA State MO Zip Code 65205

Purpose of Disbursement contribution

011

Candidate Name

**ROY BLUNT**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MO District: 00

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
04 / 17 / 2013

Transaction ID : **SB23.5135**

Amount of Each Disbursement this Period

1000.00

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

2500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF SUSAN BROOKS**

Mailing Address 9425 N MERIDIAN STREET  
# 237

City INDIANAPOLIS State IN Zip Code 46260

Purpose of Disbursement  
contribution

011

Candidate Name  
**SUSAN MRS. BROOKS**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: IN District: 05

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	1	3

Transaction ID : SB23.5144

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. LATTA FOR CONGRESS**

Mailing Address PO BOX 106

City BOWLING GREEN State OH Zip Code 43402

Purpose of Disbursement  
contribution

011

Candidate Name  
**ROBERT EDWARD MR LATTA**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: OH District: 05

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	8		2	0	1	3

Transaction ID : SB23.5151

Amount of Each Disbursement this Period

1	0	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. LUKE MESSER FOR CONGRESS**

Mailing Address P.O. BOX 917

City SHELBYVILLE State IN Zip Code 46176

Purpose of Disbursement  
contribution

011

Candidate Name  
**ALLEN LUCAS MESSER**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: IN District: 06

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	1	3

Transaction ID : SB23.5157

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

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

6	0	0	0	.	0	0
---	---	---	---	---	---	---

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

6	0	0	0	.	0	0
---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

**A. INC MCCAUL FOR CONGRESS**

Mailing Address 815-A BRAZOS STREET  
PMB 230

City AUSTIN State TX Zip Code 78701

Purpose of Disbursement  
contribution

011

Candidate Name

**MICHAEL MCCAUL**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: TX District: 10

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 21 / 2013

Transaction ID : SB23.5155

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

**B. ROGERS FOR CONGRESS**

Mailing Address PO BOX 581

City BRIGHTON State MI Zip Code 48116

Purpose of Disbursement  
contribution

011

Candidate Name

**MICHAEL J ROGERS**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MI District: 08

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 17 / 2013

Transaction ID : SB23.5138

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. SENGER FOR CONGRESS**

Mailing Address PO BOX 4883

City NAPERVILLE State IL Zip Code 60567

Purpose of Disbursement  
contribution

011

Candidate Name

**DARLENE SENGER**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: IL District: 11

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 18 / 2013

Transaction ID : SB23.5148

Amount of Each Disbursement this Period

250.00

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

2250.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

**A. VALUE IN ELECTING WOMEN POLITICAL ACTION COMMITTEE**

Mailing Address 701 8TH STREET, NW  
SUITE 500

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
contribution

011

Candidate Name

**Value in Electing Women PAC**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 17 / 2013

**Transaction ID : SB23.5141**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

1000.00

11750.00