REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM
2000 DEC 10 P 12:54

1. NAME OF COMMITTEE (In full)

Hoosiers Supporting Buyer For Congress

ADDRESS (number and street) ☐ Check if different than previously reported.

200 North Main St., P.O. Box 712

CITY, STATE and ZIP CODE

Monticello., IN 47960

STATE/DISTRICT

IN 6

2. FEC IDENTIFICATION NUMBER

C00255471

3. IS THIS REPORT AN AMENDMENT?

☐ YES ☒ NO

4. TYPE OF REPORT

☐ April 15 Quarterly Report

☐ July 15 Quarterly Report

☐ October 15 Quarterly Report

☐ January 31 Year End Report

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

☐ Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____

☒ Thirtieth day report following the General Election on 11/07/2000 in the State of IN

☐ Termination Report

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

SUMMARY

		COLUMN A This Period	COLUMN B Calendar Year-to-date
5.	Covering Period 10/19/2000 through 11/27/2000		
6.	Net Contributions (other than loans)		
	(a) Total Contributions(other than loans) (from Line 11(a))	95,535.18	527,563.66
	(b) Total Contribution Refunds (From Line 20(d))	1,100.00	3,300.00
	(c) Net Contributions (other than loans)(subtract Line 6(b) from 6(a))	94,435.18	524,263.66
7.	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 17)	349,264.49	587,633.33
	(b) Total Offsets to Operating Expenditures (from Line 14)	232.48	517.03
	(c) Net Operating Expenditures (Subtract Line 7(b) from 7(a))	349,032.01	587,116.30
8.	Cash on Hand at Close of Reporting Period (from Line 27)	51,397.41	
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$19412.39	

For further information:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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

Type or Print Name of Treasurer: Douglas E. Raderstorf

Signature of Treasurer: Douglas Raderstorf

Date: 12/06/00

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

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:	
Hoosiers Supporting Buyer For Congress	From: 10/19/2000	To: 11/27/2000

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)	36,874.09	
(ii) Unitemized	23,026.00	
(iii) Total of contributions from individual	59,900.09	239,328.09
(b) Political Party Committees	2,885.09	19,280.09
(c) Other Political Committees (such as PACs)	32,750.00	268,956.00
(d) The Candidate		
(e) TOTAL CONTRIBUTIONS (other than loans)(add 11(a)(iii), (b), (c) and (d))	95,535.18	527,563.68
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
(b) All Other Loans		
(c) TOTAL LOANS (add 13(a) and (b))		
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	232.48	617.03
15. OTHER RECEIPTS (Dividends, Interest, etc.)	901.39	7,456.23
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	96,669.05	535,636.94
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES	349,284.49	567,633.33
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate		
(b) Of All Other Loans		
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	1,100.00	2,200.00
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		1,100.00
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	1,100.00	3,300.00
21. OTHER DISBURSEMENTS		1,200.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	350,384.49	592,133.33

III. CASH SUMMARY	
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	305,082.65
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	96,669.05
25. SUBTOTAL (add Line 23 and Line 24)	401,751.90
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 16)	350,384.49
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	51,367.41

SCHEDULE A — ITEMIZED RECEIPTS

Detailed Summary Page

FOR LINE NUMBER 11(a)(i)

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

A. Full Name, Mailing Address and Zip Code John Adams 5728 Indianola Ave. Indianapolis,IN 46220- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation retired	Date (month, day, year) 10/24/2000 Aggregate Year-to-Date -> 200.00	Amount of Each Receipt this Period 100.00
B. Full Name, Mailing Address and Zip Code Herbert Allen Independence Village #207 3113 Charles B. Root Wynd Raleigh,NC 27612- Receipt For: ☐ Primary ☐ General ☒ Other (specify) Primary 2001	Name of Employer Occupation retired	Date (month, day, year) 11/10/2000 Aggregate Year-to-Date -> 500.00	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Dr. Rex Allman 1214 E. 200 S. Winamac,IN 46996- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer self Occupation Physician	Date (month, day, year) 10/27/2000 Aggregate Year-to-Date -> 200.00	Amount of Each Receipt this Period 100.00
D. Full Name, Mailing Address and Zip Code Shane Beal 514 S. Adams St. Marion,IN 46953- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Corn, Bratch & Beal Occupation Attorney	Date (month, day, year) 10/26/2000 Aggregate Year-to-Date -> 500.00	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Fred Bellingrath 30 Longmeadow Pine Bluff,AR 71603- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation retired	Date (month, day, year) 10/26/2000 Aggregate Year-to-Date -> 250.00	Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code Frank Bova P.O. Box 509 Marion,IN 46952- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer HiWay, Inc. Occupation President	Date (month, day, year) 10/26/2000 Aggregate Year-to-Date -> 250.00	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code Anna Brandt 2200 S. Ridgeview Rd. Logansport,IN 46947- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Not Employed Occupation retired	Date (month, day, year) 10/30/2000 Aggregate Year-to-Date -> 300.00	Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional)	1,900.00
TOTAL This Period (last page this line number only)	

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Detailed Summary Page

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

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard Brown 920 Bellevue Place Kokomo, IN 46901-	Not Employed Occupation: retired	10/26/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Doug Brucker 1502 Marlin Drive Marion, IN 46952-	Brucker Ent. Occupation: President	10/26/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ginger Buchanan 4415 S. 200 E. Fowler, IN 47944-	Occupation	10/26/2000	300.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	300.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Milt Cole 2283 N. Highway 17 P.O. Box 568 Logansport, IN 46947-	Cole Hardware Occupation: owner	10/30/2000	400.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	400.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Alice Craven 1627 Springbrook Dr. Elkhart, IN 46514-	Occupation: retired	10/30/2000	50.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	300.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Al Crebo 8254 W. 600 N. Sharpsville, IN 46068-	Central Indiana Eye Institute Occupation: Physician/flying eagle aviatic	10/30/2000	200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	300.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Eddie Creighton P.O. Box 1058 7180 Aubenaubee Dr. Warsaw, IN 46581-	Creighton Bros. Occupation: Farmer	10/30/2000	130.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	330.00	

SUBTOTAL of Receipts This Page (optional)	1,830.00
TOTAL This Period (last page this line number only)	

SCHEDULE A — ITEMIZED RECEIPTS

Detailed Summary Page

FOR LINE NUMBER 11(a)(i)

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

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ken Davis P.O. Box 767 241 Park Ave. Francesville, IN 47946-		10/27/2000	100.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: retired	Aggregate Year-to-Date -> 850.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Tad Davis 1455 Pennsylvania Ave. NW Suite 1200 Washington, DC 20004-	self	10/24/2000	557.38
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: Consultant	Aggregate Year-to-Date -> 557.38	IN-KIND
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ed DeMont 905 Bayless St. Plymouth, IN 46563-	Pilgrim Capital, Inc.	10/24/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: President	Aggregate Year-to-Date -> 250.00	
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Betsy Demaree P.O. Box 756 Kokomo, IN 46903-0756	Not Employed	10/03/2000	200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: housewife	Aggregate Year-to-Date -> 210.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Hubert Doughty 24 S. New York Remington, IN 47977-	self	10/24/2000	282.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: business owner	Aggregate Year-to-Date -> 282.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Dragani 14147 Lawrence Lake Dr. Plymouth, IN 46563-	Northern Indiana Manufacturing	10/24/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: owner	Aggregate Year-to-Date -> 250.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Earnest 3251 Oakwood Way Marion, IN 46952-	Preferred Medical Management	10/26/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: Executive Director	Aggregate Year-to-Date -> 700.00	

SUBTOTAL of Receipts This Page (optional)	1,869.38
TOTAL This Period (last page this line number only)	

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Detailed Summary Page

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Hoosiers Supporting Buyer For Congress

Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. John Earnest 3251 Oakwood Way Marion, IN 46952-	Preferred Medical Management / Executive Director	10/26/2000	250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->		950.00
B. Col. Frank Edens 5421 Maycross Dr. Alexandria, VA 22310-	/ retired	10/26/2000	200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->		700.00
C. Bob Elrod 3674 E. 250 S. Wabash, IN 46992-	/ retired	10/30/2000	52.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->		252.00
D. Malcolm Evans 1502 Hawksview Marion, IN 46952-	Excelcare Management, Inc. / Executive	10/26/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->		500.00
E. John Ewart 1512 Overlook Rd. Marion, IN 46952-	Agricor / President	10/26/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->		700.00
F. Michael Fleming 3834 Austell Rd. SW B Marietta, GA 30008-	Michael T. Fleming, M.D. / doctor	10/30/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->		500.00
G. Bill Fouts 427 E. 1050 S. Galveston, IN 46932-	Not Employed / retired	10/30/2000	100.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->		350.00

SUBTOTAL of Receipts This Page (optional)	2,102.00
TOTAL This Period (last page this line number only)	

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Detailed Summary Page

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

Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Ted Freidline 5266 Cider Mill Lane Indianapolis,IN 46226- Receipt For: [ ] Primary [X] General [ ] Other (specify)	self Dentist Aggregate Year-to-Date -> 250.00	11/01/2000	250.00
B. Merlin Funk 5944 N. 700 W. Royal Center,IN 46978- Receipt For: [ ] Primary [X] General [ ] Other (specify)	self Farming Aggregate Year-to-Date -> 200.00	10/30/2000	100.00
C. Vernon Furrer 6510 N. 100 H. Wolcott,IN 47995- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Self Employed Farmer Aggregate Year-to-Date -> 300.00	10/24/2000	200.00
D. James Gartland 1508 W. Overlook Rd. Marion,IN 46952- Receipt For: [ ] Primary [X] General [ ] Other (specify)	ATLAS Foundry Pres. Aggregate Year-to-Date -> 300.00	10/26/2000	250.00
E. Mary Gay 1241 N. Calle Plaza Sahuarita,AZ 85629- Receipt For: [ ] Primary [X] General [ ] Other (specify)	retired Aggregate Year-to-Date -> 250.00	10/24/2000	250.00
F. Jeffery Gibbs 9617 Locust Hill Dr. Great Falls,VA 22066- Receipt For: [ ] Primary [X] General [ ] Other (specify)	United States Government Attorney Aggregate Year-to-Date -> 250.00	11/03/2000	250.00
G. Robert Glass 1904 N. Lafountain Kokomo,IN 46901- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Chysler Corp. transmission Builder Aggregate Year-to-Date -> 278.00	10/24/2000	78.00

SUBTOTAL of Receipts This Page (optional)	1,378.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

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

A. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Courtney Gorman 444 N. Wabash Ave. Marion, IN 46952-	Self-Employed orthodonist	10/26/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Elden Gutwein 3049 S. Bay Pointe Monticello, IN 47960-	Gutwein & Company Pres./CEO	10/24/2000	200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	200.00	
C. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Jim Hall 11 Stoneridge Rd. Logansport, IN 46947-	self Physician	10/30/2000	100.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	200.00	
D. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Albert Harker 11140 Overlook Rd. Marion, IN 46952-	Kiley, Kiley, Harker, & Certal Attorney	11/01/2000	200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	200.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Frank Harper 7 Wedding Ln. Plainfield, IN 46168-	 retired	10/26/2000	100.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	300.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Matthew Harris P. O. Box 1107 Marion, IN 46952-	Quigley Insurance Insurance Agent	11/16/2000	250.00
Receipt For: [ ] Primary [ ] General [X] Other (specify) Primary 2001	Aggregate Year-to-Date ->	300.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Don Heckard 710 W. County Rd. 200 N Logansport, IN 46947-	Logan Ice owner	10/30/2000	552.71
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	802.71	IN-KIND

SUBTOTAL of Receipts This Page (optional)	1,902.71
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

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

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jim Henderson 4228 Riverside Dr. Columbus, IN 47203-	Occupation retired	10/30/2000	100.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	200.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Hendrickson P.O. Box 148 Logansport, IN 46947-	Hendrickson Motor Sales Occupation CEO	10/30/2000	200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	200.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kristine Hess 1401 Hawksview Drive Marion, IN 46952-	self Occupation Physician	10/26/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jack Higgins 3805 W. 80 N. Kokomo, IN 46901-	American Health Network Occupation Physician	11/27/2000	100.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date ->	300.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jack Hodge 2511 Lomael Ln. Marion, IN 46952-	J/Trans Trucking Occupation owner	10/26/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jeff Hodges 5025 W. 100 S. Russiaville, IN 46979-	self Occupation builder	11/03/2000	150.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	400.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jim Holt P.O. Box 838, 444 Hall Road Logansport, IN 46947-	self Occupation Financial Planner	10/30/2000	370.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	370.00	IN-KIND

SUBTOTAL of Receipts This Page (optional)	1,920.00
TOTAL This Period (last page this line number only)	

SCHEDULE A — ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

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

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jim Holt P.O. Box 838, 444 Mall Road Logansport, IN 46947-	self Occupation: Financial Planner	10/30/2000	200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->		570.00
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Edward Hostetter 6103 Wakoforest Houston, TX 77005-	Federal Container Corp. Occupation: Pres.	10/26/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->		500.00
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kenneth Hoyle 15404 Clark Rd. Lowell, IN 46356-	Occupation: retired	10/24/2000	130.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->		230.00
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joseph Huffman 519 Burlington Ave. Logansport, IN 46947-	Not Employed Occupation: retired	10/30/2000	100.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->		350.00
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gene Johnson 2527 S. 800 W. Swayzee, IN 46986-	self Occupation: Attorney	10/26/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->		250.00
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Stephan Johnson 914 Hawthorne Road Marion, IN 46952-	State of Indiana Occupation: Pros. Attorney	10/26/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->		250.00
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dean Kruse P.O. Box 7 Auburn, IN 46706-	Kruse International Occupation: chairman	10/24/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->		500.00

SUBTOTAL of Receipts This Page (optional)	1,930.00
TOTAL This Period (last page this line number only)	

SCHEDULE A — ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11(a)(i)

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

Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Michael Kubacki 1401 E. North Shore Dr. Syracuse, IN 46567-	Lake City Bank Banker	10/30/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	700.00	
B. Donald Laflamme 3216 Wildwood Dr. Marion, IN 46952-	self owner	10/26/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	
C. William Lambert 141 Orchard Lane Kokomo, IN 46901-	Star Building Supply owner	11/03/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	
D. Kent Lebherz 5774 N. New Jersey St. Indianapolis, IN 46250-	Ameritech CEO	10/31/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	
E. Richard Lee P.O. Box 2431 Kokomo, IN 46904-	Lee Excavating Contractor	10/24/2000	200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	400.00	
F. Don Link 321 S. Monticello St. Winamac, IN 46996-	Link Environmental Equip. Inc. sales	11/27/2000	250.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify) Primary 2001	Aggregate Year-to-Date ->	250.00	
G. Scott Linn 119 E. Washington St. Marion, IN 46952-	NK Communication Consultant	11/16/2000	250.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify) Primary 2001	Aggregate Year-to-Date ->	250.00	

SUBTOTAL of Receipts This Page (optional)	2,200.00
TOTAL This Period (last page this line number only)	

SCHEDULE A ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11(a)(i)

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

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Leonard Lorentson P.O. Box 932 Kokomo, IN 46903-	Lorentson Mfg. Co. Inc. Occupation: owner	10/24/2000	130.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	230.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard Lowndes, III P.O. Box 5042 Spartanburg, SC 29304-	Tindall Occupation: Executive	10/30/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Maddox 8731 Americana Blvd. Indianapolis, IN 46268-	self Occupation: Pres.	10/30/2000	200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	400.00	
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kevin McCann 1215 East 425 South Knox, IN 46534-	American Airlines Occupation: pilot	10/30/2000	200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	900.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard McClain 2135 E. Ridgeview Way Logansport, IN 46947-	State of Indiana Occupation: State Representative	10/30/2000	200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	200.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
G. Richard McClure 2539 W. Chapel Pike Marion, IN 46952-	McClure Oil Occupation: Co-owner, businessman	10/26/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	250.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dr. Charles McGee 603 N. Baldwin Ave. Marion, IN 46952-	Self-Employed Occupation: Dentist	10/26/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	

SUBTOTAL of Receipts This Page (optional)	2,480.00
TOTAL This Period (last page this line number only)	

SCHEDULE A — ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

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

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Patrick McNarny 2522 North Street Logansport,IN 46947-	Salin Bank & Trust Occupation: Vice-President	10/30/2000	200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	200.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
George Miller 10967 W. S.R. 14 Medaryville,IN 47957-	Self-Employed Occupation: Farmer	10/27/2000	200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	450.00	
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Stanley Mize 8654 Cline Ave. Crown Point,IN 46307-	Stan Mize Towne & Countree Occupation: Auto Dealer	10/26/2000	200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	300.00	
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Chris Monroe 4130 Ryan Court Kokomo,IN 46902-	self Occupation: Contractor	11/03/2000	150.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	275.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Brian Montgomery 10823 Nutmeg Meadows Dr. Plymouth,IN 46563-	Ancon Contruction Occupation: sales	10/24/2000	200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	200.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles Montgomery 2409 Hastye Hyll Logansport,IN 46947-	North Central Ind. Orthopedics Occupation: Surgeon	10/30/2000	200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	300.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas Morris 13 Stoneridge Dr. Logansport,IN 46947-2444	Occupation	11/10/2000	200.00
Receipt For: [ ] Primary [ ] General [X] Other (specify)	Aggregate Year-to-Date ->	200.00	

SUBTOTAL of Receipts This Page (optional)	1,350.00
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SCHEDULE A — ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

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

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dave Murrell 603 W. Cardinal Ln. Marion, IN 46952-	Murrell & Assoc. Occupation: Insurance Agent	10/26/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 250.00		

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Nixon P.O. Box 400 Peru, IN 46970-	self Occupation: owner	11/27/2000	2,000.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify) PR 2001 GE 2002	Aggregate Year-to-Date -> 2,000.00		

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Oliver P.O. Box 224 1433 Western Avenue Plymouth, IN 46563-	US Granules Occupation: President	10/24/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 1,000.00		

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Larry Gradat 3160 E. 200 S. Marion, IN 46953-	self Occupation: owner	10/26/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 500.00		

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Raymond Ortman 5381 N. 300 W Kokomo, IN 46901-9139	Kokomo Grain & Feed Occupation: owner	10/31/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 1,000.00		

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dwight Ott 3910 S. Adams Marion, IN 46953-	self Occupation: owner	10/26/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 250.00		

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Packard 2160 Ridgeview Rd. Logansport, IN 46947-	Am Young Occupation: Insurance Agent	10/30/2000	200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 200.00		

SUBTOTAL of Receipts This Page (optional)	5,200.00
TOTAL This Period (last page this line number only)	

SCHEDULE A — ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

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

A. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
James Plair 31 Rosman Highway Brevard, NC 28712-	Occupation: retired	10/26/2000	100.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	100.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
James Plair 31 Rosman Highway Brevard, NC 28712-	Occupation: retired	11/27/2000	100.00
Receipt For: [ ] Primary [ ] General [X] Other (specify) Primary 2001	Aggregate Year-to-Date ->	100.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Dr. Philip & Julie Polus 104 W. 145th Ave. Crown Point, IN 46307-	Name of Employer: self Occupation: Dentist-Nurse	10/24/2000	250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	250.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Jack Porter 1071 Kitten Drive Wabash, IN 46992-1031	Name of Employer: Not Employed Occupation: retired	10/26/2000	100.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	600.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Grant Poynter 4804 Pavalion Drive Kokomo, IN 46902-	Name of Employer: Not Employed Occupation: retired	11/02/2000	100.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	200.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
David Ready 606 Peru Ct. Culver, IN 46511-	Name of Employer: self Occupation: actuny	10/24/2000	100.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	400.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Dr. Roger Rolf P.O. Box 984 Dillon, SC 29536-	Name of Employer: self Occupation: doctor	11/27/2000	500.00
Receipt For: [ ] Primary [ ] General [X] Other (specify) Primary 2001	Aggregate Year-to-Date ->	500.00	

SUBTOTAL of Receipts This Page (optional)	1,250.00
TOTAL This Period (last page this line number only)	

SCHEDULE A ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

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

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Orion Rust 116 Prospect Ln. Orrfield,PA 18069-	self Occupation: Physician	10/26/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Salomon 2 Oakview Drive Monticello,IN 47960-	Heiny Insurance Agency Occupation: Insurance Agent	10/24/2000	100.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	300.00	
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Donald Scales 3532 Gleneagles Dr. Martinez,GA 30907-	self Occupation: periodontist	11/10/2000	500.00
Receipt For: [ ] Primary [ ] General [X] Other (specify) PRIMARY 2001	Aggregate Year-to-Date ->	500.00	
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sam Schlosser 10805 Nutmeg Meadows Dr. P.O. Box 523 Plymouth,IN 46563-	Plymouth Foundaries Occupation: owner	10/24/2000	250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,250.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Schofield 2400 Chris Wood Ct. Oakton,VA 22124-	Occupation: retired	10/26/2000	200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	200.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Peter Scott 504 Rudgate Ln. Kokomo,IN 46901-	self Occupation: owner	10/24/2000	100.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	200.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jim Sheets 8502 East 150 S. Fowler,IN 47944-	Self-Employed Occupation: Farmer	10/26/2000	26.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	276.00	

SUBTOTAL of Receipts This Page (optional)	1,676.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

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

A. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
George Simmons 26th ASG CIF CMR 419 Box 1978 APO,AE 09102-	DOD Customer Service Rep.	11/02/2000	130.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	480.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
John Simmons 5873 E. State Rd. 218 La Fontaine,IN 46940-	retired	10/24/2000	78.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	278.00	
C. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Charles Sims P.O. Box 517 Douglas,GA 31534-	retired	11/10/2000	200.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify) PRIMARY 2000	Aggregate Year-to-Date ->	200.00	
D. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Ron Slavens 12018 N 600 W Idaville,IN 47950-	self Farmer	10/30/2000	200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	200.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Thomas Slusser P.O. Box 33 Logansport,IN 46947-	Slusser's Greenthumb, Inc. Self Employed	10/24/2000	199.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	199.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Thomas Slusser P.O. Box 33 Logansport,IN 46947-	Slusser's Greenthumb, Inc. Self Employed	10/30/2000	199.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	398.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Jeff Smeltzer 4706 Bramoor Court Kokomo,IN 46902-	self business owner	10/24/2000	100.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	200.00	

SUBTOTAL of Receipts This Page (optional)	1,106.00
TOTAL This Period (last page this line number only)	

SCHEDULE A — ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11(a)(i)

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

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Stevens Snipes P.O. Box 590 Gleneden Beach,OR 97388-	Occupation: retired	10/24/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 250.00		

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Anoop Sondhi 12956 Brighton Ave. Carmel,IN 46032-	Self-Employed Occupation: orthodonist	10/30/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 1,000.00		IN-KIND

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Owen Stevens 4002 Oak Grove Dr. Valparaiso,IN 46383-	Knox Fertilizer Plant Occupation: V.P.	10/24/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 1,000.00		

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joel Storm 401 N. Main St. Monticello,IN 47960-	Occupation: retired	10/24/2000	130.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 230.00		

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Wallace Summerville P.O. Box 118 Plymouth,IN 46563-	Marshall Co. REMC Occupation: General Manager	10/24/2000	200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 200.00		

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Sutter 1315 Chapel Pike, Box 2050 Marion,IN 46952-	Handi Andi, Inc. Occupation: chairman	10/30/2000	100.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 200.00		

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Phil Thielen 4209 North 134th Street Omaha,NE 68164-	self Occupation: Contractor	10/26/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 500.00		

SUBTOTAL of Receipts This Page (optional)	2,930.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Annetta Vanhouten 213 S. Weston Rensselaer, IN 47978-	Fair Oaks Dairy Farm	11/01/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: Administrative Assistant		
	Aggregate Year-to-Date ->	250.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Wayne Wahlenmeier 499 Colusa Ave. Berkeley, CA 94707-	Jupiter Sales	10/26/2000	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: V. President Sales & Marketing		
	Aggregate Year-to-Date ->	250.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas Weatherwax 3012 Woodland Drive Logansport, IN 46947-	State of Indiana	10/30/2000	200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: State Representative		
	Aggregate Year-to-Date ->	200.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Matt Webber 5687 N. 200 W. Lucerne, IN 46950-	self	10/30/2000	200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: Farmer		
	Aggregate Year-to-Date ->	200.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Andy Webster 10007 W. 109th Ave. Cedar Lake, IN 46303-9253	Webster Trucking	10/30/2000	26.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: Pres.		
	Aggregate Year-to-Date ->	426.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Hugh Weckerly 2972 Chatsworth Blvd. San Diego, CA 92106-		10/30/2000	200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: retired		
	Aggregate Year-to-Date ->	800.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Chuck Miers P.O. Box 486 Demotte, IN 46310-0486	Miers Chev-Olds-Cadillac,	10/26/2000	130.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: Auto Dealer		
	Aggregate Year-to-Date ->	480.00	

SUBTOTAL of Receipts This Page (optional)	1,256.00
TOTAL This Period (last page this line number only)	

SCHEDULE A — ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11(a)(i)

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

Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Kevin Williams 2010 N. Lawson Rd. Marion, IN 46952-	Ralph H. Williams & Associates Real Estate Developer	10/26/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->		500.00
B. Full Name, Mailing Address and Zip Code Merrill Wolff P.O. Box 100 Oakford, IN 46965-	Name of Employer self Occupation Contractor	11/03/2000	250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->		575.00
C. Full Name, Mailing Address and Zip Code Alex North, Jr. P.O. Box 10012 Greensboro, NC 27404-	Name of Employer Occupation retired	10/20/2000	250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->		250.00
D. Full Name, Mailing Address and Zip Code Diane Buyer Yale 8343 Union Chapel Rd. Indianapolis, IN 46240-	Name of Employer self Occupation Dentist	10/30/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	IN-KIND
E. Full Name, Mailing Address and Zip Code Tim Yale 8343 Union Chapel Rd. Indianapolis, IN 46240-	Name of Employer Carmel Care Occupation administrator	10/30/2000	374.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	374.00	IN-KIND
F. Full Name, Mailing Address and Zip Code Ruth Ann Yantis 1994 N. State Rd. 25 Logansport, IN 46947-	Name of Employer none Occupation housewife	10/30/2000	200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	200.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer Occupation	/ /	
Receipt For: [ ] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->		

SUBTOTAL of Receipts This Page (optional)	2,574.00
TOTAL This Period (last page this line number only)	36,874.09

SCHEDULE A — ITEMIZED RECEIPTS

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

PAGE 1 OF 1

FOR LINE NUMBER 11(b)

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

A. Full Name, Mailing Address and Zip Code Indianapolis District Dental Society 8780 purdue Rd. Indianapolis,IN 46268- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 580.99	Date (month, day, year) 10/30/2000	Amount of Each Receipt this Period 580.99 IN-KIND
B. Full Name, Mailing Address and Zip Code National Republican Congressional Commit 320 First St., SE Washington,DC 20003- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation satellite feed Aggregate Year-to-Date -> 400.10	Date (month, day, year) 11/01/2000	Amount of Each Receipt this Period 204.10 IN-KIND
C. Full Name, Mailing Address and Zip Code Pulaski County Republican Central Committee Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 100.00	Date (month, day, year) 10/31/2000	Amount of Each Receipt this Period 100.00
D. Full Name, Mailing Address and Zip Code Quinn for Congress P.O. Box 2012 Blasdell,NY 14219- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Sweeney for Congress P.O. Box 4698 Saratoga Springs,NY 12866- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 10/30/2000	Amount of Each Receipt this Period 1,000.00
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)	2,885.09
TOTAL This Period (last page this line number only)	2,885.09

SCHEDULE A — ITEMIZED RECEIPTS

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

PAGE 1 OF 4

FOR LINE NUMBER 11(c)

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

Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. American Electric Power Committee for Responsible Gov'n 101 West Ohio Street Indianapolis, IN 46204- Receipt For: ☐ Primary ☒ General ☐ Other (specify)		10/31/2000	1,000.00
	Aggregate Year-to-Date →		2,500.00
B. American Hotel & Motel PAC 1201 New York Ave., NW Suite 600 Washington, DC 20005-3931 Receipt For: ☐ Primary ☒ General ☐ Other (specify)		10/24/2000	500.00
	Aggregate Year-to-Date →		3,500.00
C. American Medical Assoc. PAC 1101 Vermont Ave., NW Washington, DC 20005- Receipt For: ☐ Primary ☒ General ☐ Other (specify)		11/03/2000	2,000.00
	Aggregate Year-to-Date →		3,000.00
D. American Optometric Association PAC 1505 Prince St. - Suite 300. Alexandria, VA 22314- Receipt For: ☐ Primary ☒ General ☐ Other (specify)		10/24/2000	1,000.00
	Aggregate Year-to-Date →		3,500.00
E. American United Life Ins. Co PAC One American Square P.O. Box 368 Indianapolis, IN 46206- Receipt For: ☐ Primary ☒ General ☐ Other (specify)		10/31/2000	250.00
	Aggregate Year-to-Date →		250.00
F. Aventis Pharmaceutical Products, Inc. PAC 801 Pennsylvania Ave. NW Washington, DC 20004- Receipt For: ☐ Primary ☒ General ☐ Other (specify)		10/31/2000	500.00
	Aggregate Year-to-Date →		500.00
G. Boeing PAC 1200 Wilson Blvd. Arlington, VA 22209- Receipt For: ☐ Primary ☒ General ☐ Other (specify)		11/07/2000	500.00
	Aggregate Year-to-Date →		1,000.00

SUBTOTAL of Receipts This Page (optional)	5,750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A ITEMIZED RECEIPTS

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

PAGE 2 OF 4

FOR LINE NUMBER 11(c)

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

A. Full Name, Mailing Address and Zip Code Auction Market PAC of the Chicago Board of Trade 141 W. Jackson Blvd. Chicago,IL 60604-	Name of Employer Occupation Aggregate Year-to-Date -> 500.00	Date (month, day, year) 11/03/2000	Amount of Each Receipt this Period 500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)			
B. Full Name, Mailing Address and Zip Code DaimlerChrysler Corporation PAC Political Support Committee 1000 Chrysler Dr. , CIMS 485-09-82 Auburn Hills,MI 48326-	Name of Employer Occupation Aggregate Year-to-Date -> 3,000.00	Date (month, day, year) 10/31/2000	Amount of Each Receipt this Period 500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)			
C. Full Name, Mailing Address and Zip Code Delphi Automotive Systems PAC 5725 Delphi Dr. Troy,MI 48098-	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)			
D. Full Name, Mailing Address and Zip Code Eli Lilly Company PAC 555 12th St., NW Suite 650 Washington,DC 20004-	Name of Employer Occupation Aggregate Year-to-Date -> 3,540.00	Date (month, day, year) 10/30/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)			
E. Full Name, Mailing Address and Zip Code Exxon Mobil Corp. PAC 5959 Las Colinas Blvd. Irving,TX 75039-2180	Name of Employer Occupation Aggregate Year-to-Date -> 500.00	Date (month, day, year) 10/31/2000	Amount of Each Receipt this Period 500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)			
F. Full Name, Mailing Address and Zip Code Federal Express PAC 1980 Nonconnah Blvd. Memphis,TN 38132-	Name of Employer Occupation Aggregate Year-to-Date -> 8,000.00	Date (month, day, year) 10/30/2000	Amount of Each Receipt this Period 5,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)			
G. Full Name, Mailing Address and Zip Code Hoffmann-La Roche Inc. 1300 Eye St., NW Suite 350 W Washington,DC 20005-	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 11/07/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)			

SUBTOTAL of Receipts This Page (optional)	9,500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A — ITEMIZED RECEIPTS

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

PAGE 3 OF 4

FOR LINE NUMBER 11(c)

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

A. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
House Managers PAC 611 Pennsylvania Ave. SE Suite 360 Washington,DC 20003-		10/24/2000	5,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	5,000.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
IHTL Chiropractors Assoc. PAC 1110 N. Glebe Rd. Suite 1000 Arlington,VA 22201-		11/03/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	
C. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
National Hardwood Lumber Association PAC Inc. P.O. Box 34518 Memphis,TN 38184-0518		11/03/2000	750.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,500.00	
D. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
National Restaurant Assoc. PAC 1200 Seventeenth St., NW Washington,DC 20036-3097		10/31/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,500.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
R.R. Donnelley & Sons PAC 77 W. Wacker , 9th Floor Chicago,IL 60601-1696		11/01/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
RJR PAC 401 N. Main St. P.O. Box 718 Winston Salem,NC 27102-		10/31/2000	1,500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	3,000.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Sigeco Employees Federal PAC 20 NW 4th St. Evansville,IN 47741-		11/01/2000	5,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	5,000.00	

SUBTOTAL of Receipts This Page (optional)	14,750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A ITEMIZED RECEIPTS

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

PAGE 4 OF 4

FOR LINE NUMBER 11(c)

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

A. Full Name, Mailing Address and Zip Code Sprint Corporation PAC 2330 Shawnee Mission Parkway Shawnee Mission, KS 66205- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 11/03/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code United States Marine Repair, Inc. PAC P.O. Box 13308 San Diego, CA 92113- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 11/03/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code VFW - PAC Inc. 200 Maryland Ave. NE Suite 308 Washington, DC 20002- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 500.00	Date (month, day, year) 11/27/2000	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code White Castle, Pac 555 W. Goodale St. Columbus, OH 43215- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 250.00	Date (month, day, year) 11/01/2000	Amount of Each Receipt this Period 250.00
E. 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
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)	2,750.00
TOTAL This Period (last page this line number only)	32,750.00

SCHEDULE A — ITEMIZED RECEIPTS

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

PAGE 1 OF 1

FOR LINE NUMBER 11(d)

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

A. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Stephen Buyer 200 North Main St. Monticello,IN 47960-	United States Government Fifth District Congressman	11/07/2000	244.70
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	4,416.50	MEMO
B. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	/ /	
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date ->		
C. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	/ /	
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date ->		
D. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	/ /	
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date ->		
E. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	/ /	
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date ->		
F. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	/ /	
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date ->		
G. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	/ /	
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date ->		

SUBTOTAL of Receipts This Page (optional)	
TOTAL This Period (last page this line number only)	0.00

SCHEDULE A ITEMIZED RECEIPTS

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

PAGE 1 OF 1

FOR LINE NUMBER 15

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

A. Full Name, Mailing Address and Zip Code Lafayette Bank & Trust P.O. Box 1130 Lafayette,IN 47902- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 2,727.48	Date (month, day, year) 11/07/2000	Amount of Each Receipt this Period 180.88
B. Full Name, Mailing Address and Zip Code Wells Fargo 119 North Main Street Monticello,IN 47960-6748 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 4,727.75	Date (month, day, year) 10/31/2000	Amount of Each Receipt this Period 720.51
C. 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
D. 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
E. 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
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)	901.39
TOTAL This Period (last page this line number only)	901.39

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 17

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

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Blasted Works 214 N. Main Monticello, IN 47960-	printing expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/20/2000	15.75
Blasted Works 214 N. Main Monticello, IN 47960-	printing expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/30/2000	420.00
Ryan Brooks Reynolds, IN 47980-	entertainment election night Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/07/2000	375.00
Buschman's Service Center, Inc. 210 W. Broadway Monticello, IN 47960-	gasoline Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/30/2000	702.25
Buschman's Service Center, Inc. 210 W. Broadway Monticello, IN 47960-	gasoline Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/07/2000	507.48
Stephen Buyer 200 North Main St. Monticello, IN 47960-	"see below" Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/07/2000	244.78
House Gift Shop Washington, DC 20036-	fundraiser supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/07/2000	244.78 MEMO

SUBTOTAL of Disbursements This Page (optional)	2,265.26
TOTAL This Period (last page this line number only)	

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER 17

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

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Campbell Printing Company 125 North Van Rensselaer St. Rensselaer, IN 47978-	printing service Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/27/2000	933.87
Campbell Printing Company 125 North Van Rensselaer St. Rensselaer, IN 47978-	printing expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/07/2000	240.00
Capitol Hill Club 300 1st. St., S.E. Washington, DC 20003-	breakfest fundraiser Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/30/2000	407.21
Corporate Card P.O. Box 10347 Des Moines, IA 50306-	"see below" Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/19/2000	2,878.61
Aster Florist Washington, DC 20005-	fundraiser gifts Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/19/2000	74.03 MEMO
Capitol Hill Club 300 1st. St., S.E. Washington, DC 20003-	campaign meeting Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/19/2000	26.19 MEMO
Fedex Ship P.O. Box 1140 Dept. A Memphis, TN 38101-	shipping expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/19/2000	15.34 MEMO

SUBTOTAL of Disbursements This Page (optional)	4,467.77
TOTAL This Period (last page this line number only)	

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER 17

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

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Fedex Ship P.O. Box 1140 Dept. A Memphis, TN 38101-	shipping service Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/19/2000	22.50 MEMO
Fedex Ship P.O. Box 1140 Dept. A Memphis, TN 38101-	shipping expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/19/2000	15.34 MEMO
Mail Inc. P.O. Box 5685 Lafayette, IN 47903-	mailing service/postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/19/2000	2,665.04 MEMO
Sportsman Inn US Hwy. 421 South Monticello, IN 47960-	fundraiser lunch Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/19/2000	20.12 MEMO
Corporate Card P.O. Box 10347 Des Moines, IA 50306-	"see below" Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/07/2000	4,959.17
Fedex Ship P.O. Box 1140 Dept. A Memphis, TN 38101-	shipping expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/07/2000	35.32 MEMO
Fedex Ship P.O. Box 1140 Dept. A Memphis, TN 38101-	shipping expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/07/2000	24.32 MEMO

SUBTOTAL of Disbursements This Page (optional)	4,959.17
TOTAL This Period (last page this line number only)	

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

PAGE 4 OF 13

FOR LINE NUMBER 17

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

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Harcourt Industries 7765 S. 175 W. P.O. Box 128 Milroy, IN 46156-	printing expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/07/2000	2,457.00 MEMO
Le Bon Cafe 1310 Braddock Place Alexandria, VA 22314-	Food for fundraiser Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/07/2000	731.40 MEMO
Mail Inc. P.O. Box 5695 Lafayette, IN 47903-	mailing service & postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/07/2000	722.31 MEMO
Sportsman Inn US Hwy. 421 South Monticello, IN 47960-	lodging Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/07/2000	721.05 MEMO
Tad Davis 1455 Pennsylvania Ave. NW Suite 1200 Washington, DC 20004-	Food for fundraiser Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/24/2000	557.38 IN KIND
Friends of Don Lehe 2973 E. 1100 S. Brookston, IN 47923-	contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/28/2000	2,000.00
Kyle Hammer 200 N. Main St. Monticello, IN 47960-	payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/31/2000	1,475.00

SUBTOTAL of Disbursements This Page (optional)	4,032.38
TOTAL This Period (last page this line number only)	

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER 17

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

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Kyle Hammer 200 N. Main St. Monticello, IN 47960-	payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/07/2000	737.50
Josh Hammond 200 N. Main St. Monticello, IN 47960-	payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/31/2000	2,429.99
Josh Hammond 200 N. Main St. Monticello, IN 47960-	"see below" Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/01/2000	75.04
Josh Hammond 200 N. Main St. Monticello, IN 47960-	payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/07/2000	1,215.03
Harcourt Industries 7765 S. 175 W. P.O. Box 126 Milroy, IN 46156-	printing expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/02/2000	173.88
Don Heckard 710 W. County Rd. 200 N Logansport, IN 46947-	Food for fundraiser Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/30/2000	552.71 IN KIND
Hill Research Consultants 2202 Timberloch Place, Suite 100 The Woodlands, TX 77380-	telephone poll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/30/2000	3,510.24

SUBTOTAL of Disbursements This Page (optional)	8,694.39
TOTAL This Period (last page this line number only)	

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER 17

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

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Jim Holt P.O. Box 838, 444 Mall Road Logansport, IN 46947-	food for fundraiser Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/30/2000	370.00 IN KIND
Full Name, Mailing Address and Zip Code Ind. Dept of Revenue 100 N. Senate Ave. Indianapolis, IN 46204-	Purpose of Disbursement payroll taxes Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/07/2000	Amount of Each Disbursement This Period 519.36
Full Name, Mailing Address and Zip Code Indiana Republican State Central Comm. 200 S. Meridian. Ste. 400 Indianapolis, IN 46225-	Purpose of Disbursement tickets for state dinner Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/27/2000	Amount of Each Disbursement This Period 1,250.00
Full Name, Mailing Address and Zip Code Indiana Right to Life PAC 5001 Plaza E. Blvd. Evansville, IN 47715-	Purpose of Disbursement media advertising Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/26/2000	Amount of Each Disbursement This Period 3,000.00
Full Name, Mailing Address and Zip Code Indiana Right to Life PAC 5001 Plaza E. Blvd. Evansville, IN 47715-	Purpose of Disbursement media advertising Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/27/2000	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address and Zip Code Indianapolis District Dental Society 8780 purdue Rd. Indianapolis, IN 46268-	Purpose of Disbursement Pruchase expenses & postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/30/2000	Amount of Each Disbursement This Period 580.99 IN KIND
Full Name, Mailing Address and Zip Code Insight Communications 1500 A North Main St. Monticello, IN 47960-	Purpose of Disbursement cable service Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/27/2000	Amount of Each Disbursement This Period 39.57

SUBTOTAL of Disbursements This Page (optional)	6,259.92
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 17

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

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Insight Communications 1500 A North Main St. Monticello, IN 47960-	cable service Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/27/2000	39.57
K-Mart 1004 N. Main St. Monticello, IN 47960-	supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/07/2000	14.66
Lafayette Mailing Service 670 N. 36th Street Suite B Lafayette, IN 47905-	mailing service & postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/20/2000	88.25
Carolyn Machado 6111 Newman Road Fairfax, VA 22030-	independent fundrasier contractor Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/27/2000	9,505.64
Carolyn Machado 6111 Newman Road Fairfax, VA 22030-	independent fundraiser contractor Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/07/2000	6,347.20
Main Street Computers 224 N. Main Street P.O. Box 1003 Monticello, IN 47960-	office supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/02/2000	253.28
Stephanie Mattix 200 N. Main St. Monticello, IN 47960-	payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/31/2000	1,499.31

SUBTOTAL of Disbursements This Page (optional)	17,747.90
TOTAL This Period (last page this line number only)	

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER 17

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

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
National Finance Center P.O. Box 70874 Chicago, IL 60673-0874	health insurance Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/06/2000	481.22
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
National Republican Congressional Commit 320 First St., SE Washington, DC 20003-	member commitment Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/21/2000	10,000.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
National Republican Congressional Commit 320 First St., SE Washington, DC 20003-	member commitment Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/31/2000	11,300.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
National Republican Congressional Commit 320 First St., SE Washington, DC 20003-	satellite feed Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/01/2000	204.10 IN KIND
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Nipsco P.O. Box 13007 Merrillville, IN 46411-	electric bill Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/02/2000	169.37
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Peppercorns & Cinnamon Sticks 105 S. Main St. Monticello, IN 47960-	food expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/07/2000	3,360.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Postmaster 125 W. Broadway Monticello, IN 47960-	rental fee Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/20/2000	32.00

SUBTOTAL of Disbursements This Page (optional)	25,546.69
TOTAL This Period (last page this line number only)	

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER 17

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

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Postmaster 125 W. Broadway Monticello, IN 47960-	postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/24/2000	199.54
Postmaster 125 W. Broadway Monticello, IN 47960-	postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/02/2000	33.00
Postmaster 125 W. Broadway Monticello, IN 47960-	postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/03/2000	237.20
Postmaster 125 W. Broadway Monticello, IN 47960-	postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/14/2000	66.00
PWRTC R.R. 35, P.O. Box 330 Star City, IN 46985-	internet fee Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/01/2000	50.00
Q Graphics 108 E. Main St. P.O. Box 180 Delphi, IN 46923-	printing service Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/24/2000	957.60
Q Graphics 108 E. Main St. P.O. Box 180 Delphi, IN 46923-	printing service Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/30/2000	359.10

SUBTOTAL of Disbursements This Page (optional)	1,902.44
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 17

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

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Q Graphics 108 E. Main St. P.O. Box 180 Delphi, IN 46923-	printing services Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/06/2000	618.45
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Doug Rademacorf 200 N. Main St. Monticello, IN 47960-	payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/31/2000	384.78
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Reinforcement Design 3193 1/2 N. Clark St. Rensselaer, IN 47978-	fundraiser t-shirts Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/07/2000	700.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Rensselaer Printco 116 N. Cullen Street Rensselaer, IN 47978-	printing service Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/19/2000	1,672.65
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Sandler-Innocenzi, Inc. 705 Prince Street Alexandria, VA 22314-	media advertising Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/19/2000	108,803.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Sandler-Innocenzi, Inc. 705 Prince Street Alexandria, VA 22314-	media advertising Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/19/2000	16,399.52
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Sandler-Innocenzi, Inc. 705 Prince Street Alexandria, VA 22314-	media advertising Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/27/2000	114,488.00

SUBTOTAL of Disbursements This Page (optional)	241,066.48
TOTAL This Period (last page this line number only)	

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 17

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

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Sandler-Innocenzi, Inc. 705 Prince Street Alexandria, VA 22314-	media advertising Disbursement for: ☐ Primary ☐ Runoff ☐ Other (specify)	11/07/2000	17,015.00
Anoop Sondhi 12958 Brighton Ave. Carmel, IN 46032-	Purpose of Disbursement food for fundraiser Disbursement for: ☐ Primary ☐ Runoff ☐ Other (specify)	Date (month, day, year) 10/30/2000	Amount of Each Disbursement This Period 1,000.00 IN KIND
Sprint P.O. Box 74517 Atlanta, GA 30374-	Purpose of Disbursement telephone bill Disbursement for: ☐ Primary ☐ Runoff ☐ Other (specify)	Date (month, day, year) 10/20/2000	Amount of Each Disbursement This Period 332.99
Sprint P.O. Box 74517 Atlanta, GA 30374-	Purpose of Disbursement telephone bill Disbursement for: ☐ Primary ☐ Runoff ☐ Other (specify)	Date (month, day, year) 11/07/2000	Amount of Each Disbursement This Period 663.98
The Guide Rensselaer, IN 47978-	Purpose of Disbursement advertising expense Disbursement for: ☐ Primary ☐ Runoff ☐ Other (specify)	Date (month, day, year) 10/31/2000	Amount of Each Disbursement This Period 244.80
United Parcel Service P.O. Box 85036 Louisville, KY 40285-5036	Purpose of Disbursement shipping Disbursement for: ☐ Primary ☐ Runoff ☐ Other (specify)	Date (month, day, year) 10/20/2000	Amount of Each Disbursement This Period 39.99
United Parcel Service P.O. Box 85036 Louisville, KY 40285-5036	Purpose of Disbursement shipping Disbursement for: ☐ Primary ☐ Runoff ☐ Other (specify)	Date (month, day, year) 10/30/2000	Amount of Each Disbursement This Period 12.15

SUBTOTAL of Disbursements This Page (optional)	19,308.91
TOTAL This Period (last page this line number only)	

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER 17

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

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
United Parcel Service P.O. Box 85036 Louisville, KY 40285-5036	shipping Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/07/2000	26.07
United Parcel Service P.O. Box 85036 Louisville, KY 40285-5036	shipping Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/27/2000	55.68
Maria Vander Sande 2407 S. Colpepper Arlington, VA 22206-	campaign consultant Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/31/2000	2,000.00
Lawrence Vogel 907 E. US 24 Monticello, IN 47960-	November rent Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/01/2000	650.00
Wells Fargo 119 North Main Street Monticello, IN 47960-6748	petty cash Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/26/2000	50.00
Wells Fargo 119 North Main Street Monticello, IN 47960-6748	fees Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/31/2000	154.00
Wells Fargo 119 North Main Street Monticello, IN 47960-6748	fee Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/06/2000	5.00

SUBTOTAL of Disbursements This Page (optional)	2,940.75
TOTAL This Period (last page this line number only)	

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

PAGE 13 OF 13

FOR LINE NUMBER 17

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

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Wells Fargo 119 North Main Street Monticello, IN 47960-6748	money order Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/06/2000	120.36
Wells Fargo 119 North Main Street Monticello, IN 47960-6748	payroll taxes Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/07/2000	4,306.36
Xerox Corporation P.O. Box 660501 Dallas, TX 75266-	supplies & maintenance Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/20/2000	1,242.87
Diane Buyer Yale 6343 Union Chapel Rd. Indianapolis, IN 46240-	Food for fundraiser Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/30/2000	1,000.00 IN KIND
Tim Yale 6343 Union Chapel Rd. Indianapolis, IN 46240-	Printing expenses Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/30/2000	374.00 IN KIND
Zairmail 2800 NW 29th Ave. Portland, OR 97210-	printing expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/06/2000	370.00
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)	7,421.59
TOTAL This Period (last page this line number only)	348,613.65

SCHEDULE B — **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1
	FOR LINE NUMBER 20a

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

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
James Flair 31 Rosman Highway Brevard, NC 28712-	stop payment Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/06/2000	100.00
Hall Thompson 7 Gleneagles Dr. Shoal Creek, AL 35242-	over 25K limit Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/01/2000	1,000.00
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	/ /	
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	/ /	
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	/ /	
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	/ /	
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	/ /	

SUBTOTAL of Disbursements This Page (optional)	1,100.00
TOTAL This Period (last page this line number only)	1,100.00

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Name of Committee (In Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Hoosiers Supporting Buyer for Congress				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Corporate Card P.O. Box 10347 Des Moines, IA 50306	$2878.61	$4959.17	$7837.78	0
Nature of Debt (Purpose): fundraiser expense				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Sandler Innocenzi 705 Prince St. Alexandria, VA 22314	0	$270681.18	$256705.60	$13875.58
Nature of Debt (Purpose): media expense/in-kind				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Xeron Corp. P.O. Box 660501 Dallas, TX 75263	$1242.87	0	$1242.87	0
Nature of Debt (Purpose): copier repair				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Print Co. 116 N. Cullen St. Rensselaer, IN 47978	$1672.65	0	$1672.65	0
Nature of Debt (Purpose): printing expenses				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Hill Research Consultants 2202 Timberloch Place Suite 100 The Woodlands, TX 77380	0	$2119.56	0	$2119.56
Nature of Debt (Purpose): polls/in-kind				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Peerless Printing Corp. 513 S. Washington St. Marion, IN 46953	0	$665.54	0	$665.54
Nature of Debt (Purpose): printing expense				
1) SUBTOTALS This Period This Page (optional)				
2) TOTALS This Period (last page in this line only)				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

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SCHEDULE D
(Revised 3/90)

DEBTS AND OBLIGATIONS
Excluding Loans

Name of Committee (In Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Hoosiers Supporting Buyer for Congress				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Best Western 728 South Sixth St. Monticello, IN 47960	0	$2651.71	0	$2651.71
Nature of Debt (Purpose): lodging expense				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
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) TOTALS This Period (last page in this line only)				$19412.39
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				$19412.39

FE6AN/96

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.

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JMD
PREPARER

12-10-12
DATE PREPARED

(6/2000)