

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
Indiana Republican State Committee, Inc.

ADDRESS (number and street) 47 S. Meridian St. Suite 200  
 Check if different than previously reported. (ACC)  
INDIANAPOLIS IN 46204

2. **FEC IDENTIFICATION NUMBER** C00006486  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 05 01 2008 through 05 31 2008

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

Type or Print Name of Treasurer Todd Huston

Signature of Treasurer Electronically Filed by Todd Huston Date 06 17 2008

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

Office Use Only							
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**FEC FORM 3X**  
(Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Indiana Republican State Committee, Inc.

Report Covering the Period: From: 

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		170586.48
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	142969.28									
(c) Total Receipts (from Line 19) .....	202875.64	817015.65								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	345844.92	987602.13								
7. Total Disbursements (from Line 31) .....	150794.47	792551.68								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	195050.45	195050.45								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	16999.64									

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  
Indiana Republican State Committee, Inc.

Report Covering the Period: From: 

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	8

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	143555.00	461619.00
(i) Itemized (use Schedule A) .....	21189.00	149176.08
(ii) Unitemized .....	164744.00	610795.08
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	10000.00	38550.00
(c) Other Political Committees (such as PACs) .....	174744.00	649345.08
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
12. Transfers From Affiliated/Other Party Committees .....	2053.26	2053.26
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	50.00
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) .....	26078.38	165567.31
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	26078.38	165567.31
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	202875.64	817015.65
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	176797.26	651448.34

**DETAILED SUMMARY PAGE**

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	10653.93	60200.74
(ii) Non-Federal Share.....	27395.71	154801.83
(b) Other Federal Operating Expenditures.....	15844.10	74864.55
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	53893.74	289867.12
22. Transfers to Affiliated/Other Party Committees.....	0.00	10000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	10000.00
24. Independent Expenditure (use Schedule E) .....	2584.00	2584.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	817.94	31151.18
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 .....	55.00	55.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	5000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	55.00	5055.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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 .....	88443.79	443894.38
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	88443.79	443894.38
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	150794.47	792551.68
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	123398.76	637749.85

**DETAILED SUMMARY PAGE**  
of Disbursements

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 .....	174744.00	649345.08
34. Total Contribution Refunds (from Line 28(d)) .....	55.00	5055.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	174689.00	644290.08
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	26498.03	135065.29
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	50.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	26498.03	135015.29

**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 / 107
	<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	

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)  
Indiana Republican State Committee, Inc.

<b>A.</b>	Full Name (Last, First, Middle Initial) Robert A. Butler		Date of Receipt
	Mailing Address 4705 Ellery Lane		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 5 / 1 6 / 2 0 0 8
	City	State	Zip Code
	Indianapolis	IN	46250
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.86760
Name of Employer Butler Hyundai		Occupation Executive	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 8400.00
			In-kind - Cars for Field Directors

<b>B.</b>	Full Name (Last, First, Middle Initial) Jean Ann Harcourt		Date of Receipt
	Mailing Address 5679 W. Sr. 244		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 5 / 2 8 / 2 0 0 8
	City	State	Zip Code
	Milroy	IN	46156
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.87482
Name of Employer Harcourt Industries, Inc.		Occupation Executive	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 1500.00

<b>C.</b>	Full Name (Last, First, Middle Initial) James Banks		Date of Receipt
	Mailing Address 2626 E Cidermill Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 5 / 2 3 / 2 0 0 8
	City	State	Zip Code
	Columbia City	IN	46725
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.87770
Name of Employer Jim Banks Consulting, LLC		Occupation Executive	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 320.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 10220.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 107

(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)  
Indiana Republican State Committee, Inc.

**A.**

Full Name (Last, First, Middle Initial)  
Edward Bowman

Mailing Address 6210 Rolling Meadow Lane

City State Zip Code  
Indianapolis IN 46237

FEC ID number of contributing federal political committee. C

Name of Employer  
National Federation of Independent Bu

Occupation  
Executive

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
05 / 23 / 2008

**Transaction ID:** SA11AI.87202

Amount of Each Receipt this Period  
100.00

**B.**

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

Mailing Address 12621 Springmill Road

City State Zip Code  
Carmel IN 46032

FEC ID number of contributing federal political committee. C

Name of Employer  
Landmark Properties

Occupation  
Executive

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
05 / 28 / 2008

**Transaction ID:** SA11AI.87478

Amount of Each Receipt this Period  
5000.00

**C.**

Full Name (Last, First, Middle Initial)  
Owen D. Harvey

Mailing Address 6683 E New Discovery Rd

City State Zip Code  
Rockville IN 47872

FEC ID number of contributing federal political committee. C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
05 / 30 / 2008

**Transaction ID:** SA11AI.87073

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... 5200.00

**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 8 / 107  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

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

Mailing Address 728 J Mar Dr

City Greencastle State IN Zip Code 46135

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

Name of Employer Westpointe Dentistry Occupation Dentist

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 05 / 14 / 2008  
**Transaction ID: SA11AI.87484**  
 Amount of Each Receipt this Period: 250.00

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

Mailing Address 2949 Clifty Drive

City Madison State IN Zip Code 47250

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

Name of Employer Hardware Wholesalers, Inc. Occupation Executive

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 05 / 28 / 2008  
**Transaction ID: SA11AI.87313**  
 Amount of Each Receipt this Period: 100.00

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

Mailing Address 11905 E. County Road 500 S

City Zionsville State IN Zip Code 46077

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

Name of Employer Bindley Western Industries Occupation Executive

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 05 / 21 / 2008  
**Transaction ID: SA11AI.87053**  
 Amount of Each Receipt this Period: 2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2850.00

**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 / 107  
(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)  
Indiana Republican State Committee, Inc.

**A.**

Full Name (Last, First, Middle Initial)  
Melvin D. Wessler

Mailing Address P.O. Box 17188

City Indianapolis State IN Zip Code 46227

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

Name of Employer M.D. Wessler & Associates, Inc. Occupation Executive

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 30 / 2008  
Transaction ID: SA11AI.87291  
Amount of Each Receipt this Period 2500.00

**B.**

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

Mailing Address P. O. Box 664

City Columbus State IN Zip Code 47202

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

Name of Employer Beck Harrison & Dalmbert Occupation Attorney

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2710.00

Date of Receipt 05 / 30 / 2008  
Transaction ID: SA11AI.87277  
Amount of Each Receipt this Period 210.00

**C.**

Full Name (Last, First, Middle Initial)  
Christopher Drumm

Mailing Address 8 Moredun Place

City Philadelphia State PA Zip Code 19115

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

Name of Employer Keystone Mercy Occupation Administrator

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 30 / 2008  
Transaction ID: SA11AI.86832  
Amount of Each Receipt this Period 250.00

Best Efforts Memo  
**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2710.00

**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 10 / 107

(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)  
Indiana Republican State Committee, Inc.

**A.**

Full Name (Last, First, Middle Initial)  
Glen E. Cook

Mailing Address 3352 Topsfield Road

City State Zip Code  
South Bend IN 46614

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.86764

Amount of Each Receipt this Period

250.00

Best Efforts Memo

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
Denise E. Harris

Mailing Address 215 N 10th Street

City State Zip Code  
Petersburg IN 47567

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

Name of Employer Occupation  
Info Requested Info Requested

Receipt For: 2008  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.87453

Amount of Each Receipt this Period

400.00

**C.**

Full Name (Last, First, Middle Initial)  
John E. Rigsbee

Mailing Address 9157 N Park Avenue

City State Zip Code  
Indianapolis IN 46240

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

Name of Employer Occupation  
CSO Executive

Receipt For: 2008  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.87526

Amount of Each Receipt this Period

5000.00

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

5400.00

**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 11 / 107
	<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)  
Indiana Republican State Committee, Inc.

**A.**

Full Name (Last, First, Middle Initial) Elizabeth E. White		Date of Receipt MM / DD / YYYY 05 / 28 / 2008
Mailing Address 840 North Lake Shore Drive		<b>Transaction ID:</b> SA11AI.87281
City Chicago	State IL	Zip Code 60611
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5000.00
Name of Employer Info Requested	Occupation Info Requested	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

**B.**

Full Name (Last, First, Middle Initial) Philip F. Boberschmidt		Date of Receipt MM / DD / YYYY 05 / 23 / 2008
Mailing Address 111 Monument Circle, Suite 4560		<b>Transaction ID:</b> SA11AI.87479
City Indianapolis	State IN	Zip Code 46204
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Self-Employed	Occupation Attorney	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

**C.**

Full Name (Last, First, Middle Initial) Donald F. Woodley		Date of Receipt MM / DD / YYYY 05 / 28 / 2008
Mailing Address 8846 Worthington Cr.		<b>Transaction ID:</b> SA11AI.87270
City Indianapolis	State IN	Zip Code 46278
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2500.00
Name of Employer Woodley Farra Manion Portfolio Manage	Occupation Executive	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	7750.00
<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 12 / 107  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Carol Franks  
 Mailing Address 9079 Crystal Lake Drive  
 City Indianapolis State IN Zip Code 46240  
 Date of Receipt 05 / 30 / 2008  
**Transaction ID:** SA11AI.88202  
 Amount of Each Receipt this Period 500.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Info Requested Occupation Info Requested  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

**B.** Full Name (Last, First, Middle Initial)  
Samuel G. Clifford, Jr.  
 Mailing Address 7310 E. Walnut St.  
 City Evansville State IN Zip Code 47715  
 Date of Receipt 05 / 28 / 2008  
**Transaction ID:** SA11AI.87490  
 Amount of Each Receipt this Period 100.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Retired Occupation Retired  
 Receipt For: 2008  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

**C.** Full Name (Last, First, Middle Initial)  
Robert G. Jones  
 Mailing Address 1100 Suwannee Dr.  
 City Evansville State IN Zip Code 47725  
 Date of Receipt 05 / 14 / 2008  
**Transaction ID:** SA11AI.87862  
 Amount of Each Receipt this Period 5000.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Old National Bank Occupation Executive  
 Receipt For: 2008  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 5600.00  
**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 13 / 107  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Thomas G. Lyman  
Mailing Address 1139 Dodgson Rd  
City State Zip Code  
West Chester PA 19382  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
AmeriHealth Mercy Business Development  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00  
Date of Receipt 04 / 30 / 2008  
Transaction ID: SA11AI.86765  
Amount of Each Receipt this Period 250.00  
Best Efforts Memo  
**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Marian Godeke Miller  
Mailing Address 58 Thise Court  
City State Zip Code  
Lafayette IN 47905  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
NFRW Executive  
Receipt For: 2008  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00  
Date of Receipt 05 / 28 / 2008  
Transaction ID: SA11AI.87274  
Amount of Each Receipt this Period 500.00

**C.** Full Name (Last, First, Middle Initial)  
Trevor Gray  
Mailing Address 7122 Andre Court  
City State Zip Code  
Indianapolis IN 46278  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
ETS, Inc. Executive  
Receipt For: 2008  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 50000.00  
Date of Receipt 05 / 21 / 2008  
Transaction ID: SA11AI.87488  
Amount of Each Receipt this Period 50000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 50500.00  
**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 14 / 107
	<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)  
Indiana Republican State Committee, Inc.

<b>A.</b>	Full Name (Last, First, Middle Initial) Trevor Gray		Date of Receipt
	Mailing Address 7122 Andre Court		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 21 / 2008
	City	State	Zip Code
	Indianapolis	IN	46278
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.87489
Name of Employer ETS, Inc.		Occupation Executive	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> -30000.00
		<input type="text"/> 20000.00	Transfer to Non-Federal

<b>B.</b>	Full Name (Last, First, Middle Initial) Trevor Gray		Date of Receipt
	Mailing Address 7122 Andre Court		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 21 / 2008
	City	State	Zip Code
	Indianapolis	IN	46278
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.88044
Name of Employer ETS, Inc.		Occupation Executive	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> -10000.00
		<input type="text"/> 10000.00	Reattribute: To Spouse

<b>C.</b>	Full Name (Last, First, Middle Initial) Edna H. Gray		Date of Receipt
	Mailing Address 1128 Laurelwood		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 21 / 2008
	City	State	Zip Code
	Carmel	IN	46032
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.88045
Name of Employer ETS, Inc.		Occupation Executive	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 10000.00
		<input type="text"/> 10000.00	Reattribute: From Spouse

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> -30000.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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 / 107
	<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)  
Indiana Republican State Committee, Inc.

<b>A.</b>	Full Name (Last, First, Middle Initial) Nicholas Hermann		Date of Receipt
	Mailing Address 1320 Bayard Park Dr		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Evansville	IN	47714
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.87527
Name of Employer Dix & Hermann, LLP		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 5040.00	<input type="text"/> 5040.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Jacqueline Hill		Date of Receipt
	Mailing Address 418 E 13th Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Connersville	IN	47331
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.87470
Name of Employer Info Requested		Occupation Info Requested	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 640.00	<input type="text"/> 640.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Marjorie J. Hays		Date of Receipt
	Mailing Address 1204 Eastwood Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Rockville	IN	47872
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.87828
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 225.00	<input type="text"/> 150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 5830.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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 / 107
	<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)  
Indiana Republican State Committee, Inc.

<b>A.</b>	Full Name (Last, First, Middle Initial) Marlis Johnsen		Date of Receipt MM / DD / YYYY 05 / 02 / 2008		
	Mailing Address 6135 Martha North Dr.		<b>Transaction ID:</b> SA11AI.87660		
	City Aurora	State IN	Zip Code 47001	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired	Occupation Retired			
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Deborah K. Holden		Date of Receipt MM / DD / YYYY 05 / 14 / 2008		
	Mailing Address 12020 Hunting Crest Dr.		<b>Transaction ID:</b> SA11AI.88232		
	City Prospect	State KY	Zip Code 40059	Amount of Each Receipt this Period 5000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Info Requested	Occupation Info Requested		Reattribute: From Spouse	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Mary L. Brandt		Date of Receipt MM / DD / YYYY 05 / 30 / 2008		
	Mailing Address 8751 Jaffa Ct. East Dr. #37		<b>Transaction ID:</b> SA11AI.87323		
	City Indianapolis	State IN	Zip Code 46260	Amount of Each Receipt this Period 600.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Brandt Group LLC	Occupation Consultant			
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5700.00
<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 / 107
	<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)  
Indiana Republican State Committee, Inc.

<b>A.</b>	Full Name (Last, First, Middle Initial) David L. Hannum	Date of Receipt MM / DD / YYYY 05 / 14 / 2008
	Mailing Address 3050 Poplar Street	<b>Transaction ID:</b> SA11AI.87398
	City State Zip Code Terre Haute IN 47803	Amount of Each Receipt this Period 15000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer C.H. Garmong & Sons, Inc. Occupation Executive Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15000.00

<b>B.</b>	Full Name (Last, First, Middle Initial) David L. Hannum	Date of Receipt MM / DD / YYYY 05 / 14 / 2008
	Mailing Address 3050 Poplar Street	<b>Transaction ID:</b> SA11AI.88197
	City State Zip Code Terre Haute IN 47803	Amount of Each Receipt this Period -5000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer C.H. Garmong & Sons, Inc. Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00

Transfer to Non-Federal

<b>C.</b>	Full Name (Last, First, Middle Initial) Richard L. Johnson	Date of Receipt MM / DD / YYYY 05 / 30 / 2008
	Mailing Address PO Box 27	<b>Transaction ID:</b> SA11AI.87761
	City State Zip Code Columbus IN 47202	Amount of Each Receipt this Period 10000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Johnson Ventures, Inc. Occupation Executive Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	20000.00
<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 18 / 107  
(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)  
Indiana Republican State Committee, Inc.

**A.**

Full Name (Last, First, Middle Initial)  
Linda L. Key

Mailing Address 4924 South Emerson

City State Zip Code  
Indianapolis IN 46203

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

Name of Employer Occupation  
Payless Liquors, Inc. Executive

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2008

**Transaction ID:** SA11AI.87081

Amount of Each Receipt this Period  
5000.00

**B.**

Full Name (Last, First, Middle Initial)  
Edward L. Probst Jr.

Mailing Address 1920 Franklin

City State Zip Code  
Columbus IN 47201

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

Name of Employer Occupation  
Self-Employed Physician

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 07 / 2008

**Transaction ID:** SA11AI.87322

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)  
Mary L. Reiss

Mailing Address 437 Thompson Street

City State Zip Code  
Sullivan IN 47882

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

Name of Employer Occupation  
Info Requested Info Requested

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 28 / 2008

**Transaction ID:** SA11AI.87182

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5750.00**

**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 19 / 107  
(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)  
Indiana Republican State Committee, Inc.

**A.**

Full Name (Last, First, Middle Initial)  
Susan L. West

Mailing Address 2417 Boston Road

City Bloomington State IN Zip Code 47401

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

Name of Employer Info Requested Occupation Info Requested

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt: 05 / 30 / 2008  
**Transaction ID: SA11AI.87287**  
 Amount of Each Receipt this Period: 480.00

**B.**

Full Name (Last, First, Middle Initial)  
Charles L. Williams

Mailing Address 2501 Ashbourne Ct

City Valparaiso State IN Zip Code 46385

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

Name of Employer Elegan Sportswear Occupation Executive

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3680.00

Date of Receipt: 05 / 30 / 2008  
**Transaction ID: SA11AI.87328**  
 Amount of Each Receipt this Period: 3680.00

**C.**

Full Name (Last, First, Middle Initial)  
Marcus Lee Applegate

Mailing Address 2705 S. 975 E.

City Zionsville State IN Zip Code 46077

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

Name of Employer AMCO Elevators, Inc. Occupation Business

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 05 / 30 / 2008  
**Transaction ID: SA11AI.87194**  
 Amount of Each Receipt this Period: 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4410.00**

**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 20 / 107  
(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)  
Indiana Republican State Committee, Inc.

**A.**

Full Name (Last, First, Middle Initial)  
Kenneth L Hosner

Mailing Address 5692 Comstock Ave.

City State Zip Code  
Kalamazoo MI 49048

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

Name of Employer Retired Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

Transaction ID: SA11AI.87675

Amount of Each Receipt this Period  
500.00

**B.**

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

Mailing Address 112 Creekside Ln.

City State Zip Code  
Fishers IN 46038

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

Name of Employer United Benefits Advisors Occupation Association Executive

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: SA11AI.87792

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)  
Jeanne M. Bowen

Mailing Address 21S Creedmoor Way

City State Zip Code  
Anderson IN 46011

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

Name of Employer Dr. William J. Bowen Occupation Administrative Assistant

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.87831

Amount of Each Receipt this Period  
1500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2250.00**

**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 21 / 107  
(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
							17

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NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

**A.**

Full Name (Last, First, Middle Initial)  
Frank M. Hancock

Mailing Address 2433 Quiet Way

City Indianapolis State IN Zip Code 46239

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

Name of Employer Sports Graphics, Inc. Occupation Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1760.00

Date of Receipt 05 / 06 / 2008

Transaction ID: SA11AI.88238

Amount of Each Receipt this Period 310.00

In-kind - Business Cards

**B.**

Full Name (Last, First, Middle Initial)  
Dennis M. Hartman

Mailing Address 50800 Lilac Road

City South Bend State IN Zip Code 46628

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

Name of Employer Twinlode Corporation Occupation Executive

Receipt For: 2008  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 14 / 2008

Transaction ID: SA11AI.87545

Amount of Each Receipt this Period 1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Raymond M. Maddox

Mailing Address 1185 S. Eric Lane

City Rushville State IN Zip Code 46173

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

Name of Employer Indiana Dental PAC Occupation Physician

Receipt For: 2008  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 625.00

Date of Receipt 05 / 14 / 2008

Transaction ID: SA11AI.87278

Amount of Each Receipt this Period 125.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1435.00

**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 / 107
	<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)  
Indiana Republican State Committee, Inc.

<b>A.</b>	Full Name (Last, First, Middle Initial) Julia M. Mann		Date of Receipt MM / DD / YYYY 05 / 30 / 2008		
	Mailing Address 8178 Heyward Drive		<b>Transaction ID:</b> SA11AI.87461		
	City Indianapolis	State IN	Zip Code 46250	Amount of Each Receipt this Period 600.00	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer Info Requested		Occupation Info Requested		
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Philip Mayberry		Date of Receipt MM / DD / YYYY 05 / 23 / 2008		
	Mailing Address 316 Monte Vista Dr.		<b>Transaction ID:</b> SA11AI.87316		
	City Fort Wayne	State IN	Zip Code 46814	Amount of Each Receipt this Period 2500.00	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer Info Requested		Occupation Info Requested		
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Carolyn N. Clements		Date of Receipt MM / DD / YYYY 05 / 21 / 2008		
	Mailing Address P.O. Box 202		<b>Transaction ID:</b> SA11AI.87283		
	City Paoli	State IN	Zip Code 47454	Amount of Each Receipt this Period 640.00	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer Info Requested		Occupation Info Requested		
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 640.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3740.00</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 23 / 107
	<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)  
Indiana Republican State Committee, Inc.

<b>A.</b>	Full Name (Last, First, Middle Initial) Donald N. Schrock		Date of Receipt MM / DD / YYYY 05 / 30 / 2008		
	Mailing Address 21934 Shirley Dr		<b>Transaction ID:</b> SA11AI.87331		
	City Goshen	State IN	Zip Code 46526	Amount of Each Receipt this Period 150.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Info Requested		Occupation Info Requested		
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) David N. Shane		Date of Receipt MM / DD / YYYY 05 / 28 / 2008		
	Mailing Address 6355 Oxbow Way		<b>Transaction ID:</b> SA11AI.87656		
	City Indianapolis	State IN	Zip Code 46220	Amount of Each Receipt this Period 2500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer LDI, Ltd.		Occupation Executive		
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Robert Noetzel		Date of Receipt MM / DD / YYYY 05 / 21 / 2008		
	Mailing Address 7590 N. 300 E.		<b>Transaction ID:</b> SA11AI.87716		
	City Decatur	State IN	Zip Code 46733	Amount of Each Receipt this Period 1040.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Info Requested		Occupation Info Requested		
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1040.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3690.00
<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 24 / 107

(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)  
Indiana Republican State Committee, Inc.

**A.**

Full Name (Last, First, Middle Initial)  
Gale Pearce

Mailing Address 2700 W Cypress Creek Rd, #D116

City State Zip Code  
Ft. Lauderdale FL 33309

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

Name of Employer Occupation  
AmeriHealth Mercy Health Plan Executive

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.86763

Amount of Each Receipt this Period

250.00

Best Efforts Memo

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
Charles R. Epperson

Mailing Address 6053 Spring Mill Road

City State Zip Code  
Indianapolis IN 46228

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

Name of Employer Occupation  
Self-Employed Medical Professional

Receipt For: 2008  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.87708

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)  
Mark R. Holden

Mailing Address 12020 Hunting Crest Drive

City State Zip Code  
Prospect KY 40059

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

Name of Employer Occupation  
American Commercial Lines, Inc. Executive

Receipt For: 2008  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
15000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.87525

Amount of Each Receipt this Period

15000.00

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

15300.00

**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 25 / 107  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Mark R. Holden

Mailing Address 12020 Hunting Crest Drive

City Prospect State KY Zip Code 40059

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

Name of Employer American Commercial Lines, Inc. Occupation Executive

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 05 / 14 / 2008  
**Transaction ID:** SA11AI.88231  
 Amount of Each Receipt this Period -5000.00  
 Reattribute: To Spouse

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

Mailing Address 3895 Windsor Rd

City Tell City State IN Zip Code 47586

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

Name of Employer Retired Occupation Retired

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 30 / 2008  
**Transaction ID:** SA11AI.87241  
 Amount of Each Receipt this Period 1000.00

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

Mailing Address 3895 Windsor Rd

City Tell City State IN Zip Code 47586

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

Name of Employer Retired Occupation Retired

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1080.00

Date of Receipt 05 / 30 / 2008  
**Transaction ID:** SA11AI.87242  
 Amount of Each Receipt this Period 80.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **-3920.00**

**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 26 / 107

(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)  
Indiana Republican State Committee, Inc.

**A.**

Full Name (Last, First, Middle Initial)  
Thomas R. McCart

Mailing Address 3895 Windsor Rd

City	State	Zip Code
Tell City	IN	47586

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1330.00
---	-------------------------------------

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.87243

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
Donald R. Pletcher

Mailing Address 3 Holly Lane

City	State	Zip Code
Elkhart	IN	46514

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

Name of Employer Damon Corporation	Occupation Executive
---------------------------------------	-------------------------

Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.87294

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)  
Steven R. Schreckengast

Mailing Address 1621 Skyline Road

City	State	Zip Code
Lafayette	IN	47905

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

Name of Employer Citation Homes	Occupation Contractor
------------------------------------	--------------------------

Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00
---	-------------------------------------

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.87768

Amount of Each Receipt this Period  
2500.00

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

3000.00

**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 27 / 107  
(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)  
Indiana Republican State Committee, Inc.

**A.**

Full Name (Last, First, Middle Initial)  
Stuart Reed

Mailing Address 9455 Delegates Row

City Indianapolis State IN Zip Code 46240

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

Name of Employer American Living Centers III Occupation Executive

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 05 / 07 / 2008  
**Transaction ID:** SA11AI.87375  
 Amount of Each Receipt this Period 10000.00

**B.**

Full Name (Last, First, Middle Initial)  
Joe Rogers

Mailing Address 940 Strawbridge Lane

City Brownsburg State IN Zip Code 46112

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

Name of Employer Advanced Drainage Systems Occupation Executive

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 05 / 30 / 2008  
**Transaction ID:** SA11AI.87523  
 Amount of Each Receipt this Period 750.00

**C.**

Full Name (Last, First, Middle Initial)  
Thomas S. Deiwert

Mailing Address 100 Riley Road

City Delphi State IN Zip Code 46923

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

Name of Employer Info Requested Occupation Info Requested

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 05 / 30 / 2008  
**Transaction ID:** SA11AI.87821  
 Amount of Each Receipt this Period 240.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 10990.00

**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 28 / 107  
(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)  
Indiana Republican State Committee, Inc.

**A.**

Full Name (Last, First, Middle Initial)  
William Springer

Mailing Address 205 S Holloway St

City State Zip Code  
Sullivan IN 47882

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

Name of Employer Info Requested Occupation Info Requested

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
480.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2008

**Transaction ID:** SA11AI.87480

Amount of Each Receipt this Period  
480.00

**B.**

Full Name (Last, First, Middle Initial)  
Donald W. Pearson

Mailing Address 10454 Beacon Lane

City State Zip Code  
Indianapolis IN 46256

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

Name of Employer Info Requested Occupation Info Requested

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2008

**Transaction ID:** SA11AI.87754

Amount of Each Receipt this Period  
350.00

**C.**

Full Name (Last, First, Middle Initial)  
Martin Weaver

Mailing Address 1800 Foxcliff Est. N.

City State Zip Code  
Martinsville IN 46151

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

Name of Employer Info Requested Occupation Info Requested

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2008

**Transaction ID:** SA11AI.87301

Amount of Each Receipt this Period  
2000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2830.00**

**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 29 / 107  
(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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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)  
Indiana Republican State Committee, Inc.

A.

Full Name (Last, First, Middle Initial)  
Jonathon Willey

Mailing Address 7859 E 200 S

City State Zip Code  
Greenfield IN 46140

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

Name of Employer Occupation  
Anthem, Inc. Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2320.00

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

Transaction ID: SA11AI.88235

Amount of Each Receipt this Period  
2320.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2320.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	143555.00

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

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

FOR LINE NUMBER: PAGE 30 / 107  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

**A.** Full Name (Last, First, Middle Initial)  
HNTB HOLDINGS LTD. POLITICAL ACTION COMMITTEE

Date of Receipt  

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

**Transaction ID:** SA11C.87529

Mailing Address 715 Kirk Drive  
HNTB CORPORATION C/O MIKE SCHUERIN

City State Zip Code  
Kansas City MO 64105

FEC ID number of contributing federal political committee. **C** C00386029

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Amount of Each Receipt this Period  
10000.00

**B.** Full Name (Last, First, Middle Initial)  
HNTB HOLDINGS LTD. POLITICAL ACTION COMMITTEE

Date of Receipt  

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

**Transaction ID:** SA11C.87530

Mailing Address 715 Kirk Drive  
HNTB CORPORATION C/O MIKE SCHUERIN

City State Zip Code  
Kansas City MO 64105

FEC ID number of contributing federal political committee. **C** C00386029

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Amount of Each Receipt this Period  
-5000.00

Transfer to Non-Federal Account

**C.** Full Name (Last, First, Middle Initial)  
OLD NATIONAL BANK IN EVANSVILLE OLBANK PAC

Date of Receipt  

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

**Transaction ID:** SA11C.88233

Mailing Address 101 NW Fourth Street

City State Zip Code  
Evansville IN 47708

FEC ID number of contributing federal political committee. **C** C00165282

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	10000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	10000.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 107  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

A.

Full Name (Last, First, Middle Initial)  
JonElrod.com

Mailing Address 5329 S Emerson Ave, Suite C

City State Zip Code  
Indianapolis IN 46237

FEC ID number of contributing federal political committee. **C** C00442863

Name of Employer Occupation  
Jon Elrod

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2603.26

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

Transaction ID: SA12.87551

Amount of Each Receipt this Period  
2053.26

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2053.26
<b>TOTAL</b> This Period (last page this line number only) .....	▶	2053.26

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)  
Indiana Republican State Committee, Inc.

<p><b>A.</b> Full Name (Last, First, Middle Initial) Robert A. Butler</p> <p>Mailing Address 4705 Ellery Lane</p> <p>City Indianapolis State IN Zip Code 46250</p> <p>Purpose of Disbursement In-kind - Cars for Field Directors</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.86762</p> <p>Date of Disbursement 05 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 8400.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Buysellshop.com</p> <p>Mailing Address 7129 Red Lake Ct.</p> <p>City Indianapolis State IN Zip Code 46217</p> <p>Purpose of Disbursement Website Hosting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.88062</p> <p>Date of Disbursement 05 / 09 / 2008</p> <p>Amount of Each Disbursement this Period 75.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Exact Target</p> <p>Mailing Address 20 N. Meridian St., Ste. 200</p> <p>City Indianapolis State IN Zip Code 46204</p> <p>Purpose of Disbursement Email Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.88104</p> <p>Date of Disbursement 05 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 4895.84</p>

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

13370.84

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)  
Indiana Republican State Committee, Inc.

A.	Full Name (Last, First, Middle Initial) Frank M. Hancock	Transaction ID: SB21B.88239 Date of Disbursement MM / DD / YYYY 05 / 06 / 2008
	Mailing Address 2433 Quiet Way	Amount of Each Disbursement this Period  310.00
	City Indianapolis State IN Zip Code 46239	
Purpose of Disbursement In-kind - Business Cards	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:
Candidate Name		

B.	Full Name (Last, First, Middle Initial) Marketing Informatics, LLC	Transaction ID: SB21B.88072 Date of Disbursement MM / DD / YYYY 05 / 23 / 2008
	Mailing Address 5739 Professional Circle	Amount of Each Disbursement this Period  1042.88
	City Indianapolis State IN Zip Code 46241	
Purpose of Disbursement Golf Outing Post Cards	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:
Candidate Name		

C.	Full Name (Last, First, Middle Initial) MX Logic	Transaction ID: SB21B.88076 Date of Disbursement MM / DD / YYYY 05 / 23 / 2008
	Mailing Address PO Box 60157	Amount of Each Disbursement this Period  113.75
	City Los Angeles State CA Zip Code 90060	
Purpose of Disbursement Email Spam Filter	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:
Candidate Name		

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

1466.63

**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)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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

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)  
Indiana Republican State Committee, Inc.

A.

Full Name (Last, First, Middle Initial)  
Sport Graphics Printing

Transaction ID: SB21B.88092

Date of Disbursement

Mailing Address 3423 Park Davis Circle

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

City Indianapolis State IN Zip Code 46235

Amount of Each Disbursement this Period

1006.63
---------

Purpose of Disbursement  
State Party Dinner Invite Postage

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ..... ►

1006.63
---------

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

15844.10
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**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)

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<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)  
Indiana Republican State Committee, Inc.

A.	Full Name (Last, First, Middle Initial) Friends of Mike Sodrel		Transaction ID: SB23.88098	
	Mailing Address 702 N Shore Drive, Ste 500 PO Box		Date of Disbursement MM / DD / YYYY 05 / 02 / 2008	
	City Jeffersonville	State IN	Zip Code 47130	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Contribution		Category/ Type	
	Candidate Name			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	State: IN	District: 09		

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

5000.00

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

5000.00

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

A.	Full Name (Last, First, Middle Initial) A. G. Edwards & Sons, Inc.	Transaction ID: SB30B.88094 Date of Disbursement 05 / 09 / 2008
	Mailing Address 500 East 96th Street, Suite 100	Amount of Each Disbursement this Period 719.20
	City Indianapolis State IN Zip Code 46240	
	Purpose of Disbursement FEA: IRA Contributions Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) A. G. Edwards & Sons, Inc.	Transaction ID: SB30B.88093 Date of Disbursement 05 / 23 / 2008
	Mailing Address 500 East 96th Street, Suite 100	Amount of Each Disbursement this Period 719.20
	City Indianapolis State IN Zip Code 46240	
	Purpose of Disbursement FEA: IRA Contributions Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) AccuPay	Transaction ID: SB30B.88123 Date of Disbursement 05 / 08 / 2008
	Mailing Address 584 N Emerson Ave.	Amount of Each Disbursement this Period 8123.11
	City Greenwood State IN Zip Code 46143	
	Purpose of Disbursement FEA: Payroll Taxes Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>9561.51</b>
<b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

A.	Full Name (Last, First, Middle Initial) AccuPay	Transaction ID: SB30B.88124 Date of Disbursement
	Mailing Address 584 N Emerson Ave.	<input type="text" value="05"/> / <input type="text" value="08"/> / <input type="text" value="2008"/>
	City Greenwood State IN Zip Code 46143	Amount of Each Disbursement this Period
	Purpose of Disbursement FEA: Payroll Processing	<input type="text" value="39.42"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) AccuPay	Transaction ID: SB30B.88121 Date of Disbursement
	Mailing Address 584 N Emerson Ave.	<input type="text" value="05"/> / <input type="text" value="22"/> / <input type="text" value="2008"/>
	City Greenwood State IN Zip Code 46143	Amount of Each Disbursement this Period
	Purpose of Disbursement FEA: Payroll Taxes	<input type="text" value="8510.15"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) AccuPay	Transaction ID: SB30B.88122 Date of Disbursement
	Mailing Address 584 N Emerson Ave.	<input type="text" value="05"/> / <input type="text" value="22"/> / <input type="text" value="2008"/>
	City Greenwood State IN Zip Code 46143	Amount of Each Disbursement this Period
	Purpose of Disbursement FEA: Payroll Processing	<input type="text" value="39.60"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="8589.17"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

A.	Full Name (Last, First, Middle Initial) Anthem Blue Cross Blue Shield of Indiana	Transaction ID: SB30B.88052
	Mailing Address 220 Virginia Avenue	Date of Disbursement MM / DD / YYYY 05 / 02 / 2008
	City Indianapolis State IN Zip Code 46204	Amount of Each Disbursement this Period 4307.59
	Purpose of Disbursement FEA: Health Insurance	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Anthem Life Insurance Company	Transaction ID: SB30B.88112
	Mailing Address Department L-880	Date of Disbursement MM / DD / YYYY 05 / 02 / 2008
	City Columbus State IN Zip Code 43260	Amount of Each Disbursement this Period 122.13
	Purpose of Disbursement FEA: Life Insurance	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) AT&T Wireless	Transaction ID: SB30B.88129
	Mailing Address P.O. Box 30024	Date of Disbursement MM / DD / YYYY 05 / 09 / 2008
	City College Station State TX Zip Code 77842	Amount of Each Disbursement this Period 477.81
	Purpose of Disbursement FEA: Cell Phone Expense	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>4907.53</b>
<b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) AT&T Wireless Mailing Address P.O. Box 30024 City College Station State TX Zip Code 77842 Purpose of Disbursement FEA: Cell Phone Min.-Generic Phone Banks Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.86796 Date of Disbursement MM / DD / YYYY 05 / 23 / 2008
	Amount of Each Disbursement this Period 397.50 [MEMO ITEM]

<b>B.</b> Full Name (Last, First, Middle Initial) Emmalee C. Frey Mailing Address 3981 Shadow Hill Court City Greenwood State IN Zip Code 46142 Purpose of Disbursement FEA: Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.88053 Date of Disbursement MM / DD / YYYY 05 / 08 / 2008
	Amount of Each Disbursement this Period 986.24

<b>C.</b> Full Name (Last, First, Middle Initial) Emmalee C. Frey Mailing Address 3981 Shadow Hill Court City Greenwood State IN Zip Code 46142 Purpose of Disbursement FEA: Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.88054 Date of Disbursement MM / DD / YYYY 05 / 22 / 2008
	Amount of Each Disbursement this Period 946.25

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1932.49
<b>TOTAL</b> 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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

A.	Full Name (Last, First, Middle Initial) Chase Card Services	Transaction ID: SB30B.88114 Date of Disbursement 05 / 23 / 2008
	Mailing Address P.O. Box 94014	Amount of Each Disbursement this Period 397.50
	City Palatine State IL Zip Code 60094	
	Purpose of Disbursement FEA: Cell Phones for Generic Phone Banks	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Jeffery Coats	Transaction ID: SB30B.88106 Date of Disbursement 05 / 08 / 2008
	Mailing Address 6942 Clemdale Ave.	Amount of Each Disbursement this Period 1351.66
	City Indianapolis State IN Zip Code 46226	
	Purpose of Disbursement FEA: Payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Jeffery Coats	Transaction ID: SB30B.88105 Date of Disbursement 05 / 22 / 2008
	Mailing Address 6942 Clemdale Ave.	Amount of Each Disbursement this Period 1351.65
	City Indianapolis State IN Zip Code 46226	
	Purpose of Disbursement FEA: Payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3100.81</b>
<b>TOTAL</b> 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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

A.	Full Name (Last, First, Middle Initial) Teresa E. Buckley	Transaction ID: SB30B.88079 Date of Disbursement MM / DD / YYYY 05 / 08 / 2008
	Mailing Address 5335 Norwaldo Ave.	Amount of Each Disbursement this Period 1125.59
	City Indianapolis State IN Zip Code 46220	
	Purpose of Disbursement FEA: Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Teresa E. Buckley	Transaction ID: SB30B.88080 Date of Disbursement MM / DD / YYYY 05 / 22 / 2008
	Mailing Address 5335 Norwaldo Ave.	Amount of Each Disbursement this Period 1125.60
	City Indianapolis State IN Zip Code 46220	
	Purpose of Disbursement FEA: Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Stacey E. Perry	Transaction ID: SB30B.88073 Date of Disbursement MM / DD / YYYY 05 / 08 / 2008
	Mailing Address 18947 Prairie Crossing Dr.	Amount of Each Disbursement this Period 511.93
	City Noblesville State IN Zip Code 46062	
	Purpose of Disbursement FEA: Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	2763.12
<b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

A.	Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: SB30B.88215 Date of Disbursement
	Mailing Address 7300 Hudson Blvd, Suite 270	<input type="text" value="05"/> <input type="text" value="02"/> / <input type="text" value="2008"/>
	City Saint Paul State MN Zip Code 55128	Amount of Each Disbursement this Period
	Purpose of Disbursement FEA: State Party Generic Telemarketing	<input type="text" value="5372.10"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: SB30B.88216 Date of Disbursement
	Mailing Address 7300 Hudson Blvd, Suite 270	<input type="text" value="05"/> <input type="text" value="14"/> / <input type="text" value="2008"/>
	City Saint Paul State MN Zip Code 55128	Amount of Each Disbursement this Period
	Purpose of Disbursement FEA: State Party Generic Telemarketing	<input type="text" value="1854.15"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: SB30B.88058 Date of Disbursement
	Mailing Address 7300 Hudson Blvd, Suite 270	<input type="text" value="05"/> <input type="text" value="23"/> / <input type="text" value="2008"/>
	City Saint Paul State MN Zip Code 55128	Amount of Each Disbursement this Period
	Purpose of Disbursement FEA: Generic State Party Telemarketing	<input type="text" value="72.95"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="7299.20"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# 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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) FLS Connect <hr/> Mailing Address 7300 Hudson Blvd, Suite 270 <hr/> City Saint Paul State MN Zip Code 55128 <hr/> Purpose of Disbursement FEA: State Party Generic Telemarketing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.88240 Date of Disbursement MM / DD / YYYY 05 / 23 / 2008
	Amount of Each Disbursement this Period 852.32
	Category/ Type
	Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Guardian Insurance <hr/> Mailing Address P.O. Box 2459 <hr/> City Spokane State WA Zip Code 99210 <hr/> Purpose of Disbursement FEA: Dental & Vision Insurance Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.88111 Date of Disbursement MM / DD / YYYY 05 / 02 / 2008
	Amount of Each Disbursement this Period 807.51
	Category/ Type
	Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Kyle J. Waggoner <hr/> Mailing Address 7117 Kennesaw Circle <hr/> City Brownsburg State IN Zip Code 46112 <hr/> Purpose of Disbursement FEA: Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.88083 Date of Disbursement MM / DD / YYYY 05 / 22 / 2008
	Amount of Each Disbursement this Period 397.74
	Category/ Type
	Category/ Type

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

2057.57

**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 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 checked="" type="checkbox"/> 30b

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)  
Indiana Republican State Committee, Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) Jay Kenworthy <hr/> Mailing Address 6762 Lexington Circle <hr/> City Zionsville State IN Zip Code 46077 <hr/> Purpose of Disbursement FEA: Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB30B.88050 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 8
	Amount of Each Disbursement this Period 1612.60
	Category/ Type
	State: District:
<b>B.</b> Full Name (Last, First, Middle Initial) Jay Kenworthy <hr/> Mailing Address 6762 Lexington Circle <hr/> City Zionsville State IN Zip Code 46077 <hr/> Purpose of Disbursement FEA: Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB30B.88051 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 8
	Amount of Each Disbursement this Period 1612.60
	Category/ Type
	State: District:
<b>C.</b> Full Name (Last, First, Middle Initial) Matthew Kirby <hr/> Mailing Address 25 E. 40th St., 2F <hr/> City Indianapolis State IN Zip Code 46205 <hr/> Purpose of Disbursement FEA: Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB30B.88127 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 8
	Amount of Each Disbursement this Period 1346.57
	Category/ Type
	State: District:

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4571.77
<b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

A.	Full Name (Last, First, Middle Initial) Matthew Kirby	Transaction ID: SB30B.88128
	Mailing Address 25 E. 40th St., 2F	Date of Disbursement MM / DD / YYYY 05 / 22 / 2008
	City Indianapolis State IN Zip Code 46205	Amount of Each Disbursement this Period 1346.56
	Purpose of Disbursement FEA: Payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Barbara L. McClellan	Transaction ID: SB30B.88088
	Mailing Address 1017 Liberty Dr.	Date of Disbursement MM / DD / YYYY 05 / 08 / 2008
	City Westfield State IN Zip Code 46074	Amount of Each Disbursement this Period 1559.81
	Purpose of Disbursement FEA: Payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Barbara L. McClellan	Transaction ID: SB30B.88087
	Mailing Address 1017 Liberty Dr.	Date of Disbursement MM / DD / YYYY 05 / 22 / 2008
	City Westfield State IN Zip Code 46074	Amount of Each Disbursement this Period 1468.64
	Purpose of Disbursement FEA: Payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

4375.01

**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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

<p><b>A.</b> Full Name (Last, First, Middle Initial) Lifeline Communications, Inc.</p> <p>Mailing Address 11618 Brooks Ct.</p> <p>City Carmel State IN Zip Code 46033</p> <p>Purpose of Disbursement FEA: Technology Consultant</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB30B.88113</p> <p>Date of Disbursement 05 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 2943.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Matt Maday</p> <p>Mailing Address 6001 Crittenden Ave.</p> <p>City Indianapolis State IN Zip Code 46220</p> <p>Purpose of Disbursement FEA: Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB30B.88077</p> <p>Date of Disbursement 05 / 08 / 2008</p> <p>Amount of Each Disbursement this Period 794.12</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Matt Maday</p> <p>Mailing Address 6001 Crittenden Ave.</p> <p>City Indianapolis State IN Zip Code 46220</p> <p>Purpose of Disbursement FEA: Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB30B.88078</p> <p>Date of Disbursement 05 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 801.79</p>

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

4538.91

**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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

A.	Full Name (Last, First, Middle Initial) Mellon Trust of New England	Transaction ID: SB30B.88194 Date of Disbursement
	Mailing Address PO Box 4038	<input type="text" value="05"/> <input type="text" value="06"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Woburn State MA Zip Code 01888	Amount of Each Disbursement this Period
	Purpose of Disbursement FEA: HSA Contribution	<input type="text" value="212.26"/>
	Candidate Name	<input type="text"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Mellon Trust of New England	Transaction ID: SB30B.88195 Date of Disbursement
	Mailing Address PO Box 4038	<input type="text" value="05"/> <input type="text" value="21"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Woburn State MA Zip Code 01888	Amount of Each Disbursement this Period
	Purpose of Disbursement FEA: HSA Contribution	<input type="text" value="212.26"/>
	Candidate Name	<input type="text"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Merchants Garage	Transaction ID: SB30B.88115 Date of Disbursement
	Mailing Address 31 South Meridian St.	<input type="text" value="05"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Indianapolis State IN Zip Code 46200	Amount of Each Disbursement this Period
	Purpose of Disbursement FEA: Parking Expense	<input type="text" value="1075.00"/>
	Candidate Name	<input type="text"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1499.52"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# 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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) Merrill Lynch <hr/> Mailing Address 510 E. 96th Street, Suite 500 <hr/> City Indianapolis State IN Zip Code 46240 <hr/> Purpose of Disbursement FEA: IRA Contributions Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.88069 Date of Disbursement MM / DD / YYYY 05 / 09 / 2008
	Amount of Each Disbursement this Period 83.08
	Category/ Type
	Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Merrill Lynch <hr/> Mailing Address 510 E. 96th Street, Suite 500 <hr/> City Indianapolis State IN Zip Code 46240 <hr/> Purpose of Disbursement FEA: IRA Contributions Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.88070 Date of Disbursement MM / DD / YYYY 05 / 23 / 2008
	Amount of Each Disbursement this Period 83.08
	Category/ Type
	Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Merrill Lynch-Indianapolis <hr/> Mailing Address Bank One Center/Tower 111 Monument <hr/> City Indianapolis State IN Zip Code 46204 <hr/> Purpose of Disbursement FEA: IRA Contributions Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.88096 Date of Disbursement MM / DD / YYYY 05 / 09 / 2008
	Amount of Each Disbursement this Period 683.52
	Category/ Type
	Category/ Type

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

849.68

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

A.	Full Name (Last, First, Middle Initial) Merrill Lynch-Indianapolis	Transaction ID: SB30B.88095
	Mailing Address Bank One Center/Tower 111 Monument	Date of Disbursement MM / DD / YYYY 05 / 23 / 2008
	City Indianapolis State IN Zip Code 46204	Amount of Each Disbursement this Period 683.52
	Purpose of Disbursement FEA: IRA Contributions	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) J. Murray Clark	Transaction ID: SB30B.88089
	Mailing Address 9080 Pickwick Dr.	Date of Disbursement MM / DD / YYYY 05 / 23 / 2008
	City Indianapolis State IN Zip Code 46260	Amount of Each Disbursement this Period 197.29
	Purpose of Disbursement FEA: Cell Phone Reimbursement	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Brad Powlen	Transaction ID: SB30B.88119
	Mailing Address 4331 Irish Hills Dr. Apt 3D	Date of Disbursement MM / DD / YYYY 05 / 08 / 2008
	City South Bend State IN Zip Code 46614	Amount of Each Disbursement this Period 957.36
	Purpose of Disbursement FEA: Payroll	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1838.17</b>
<b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

<b>A.</b>	Full Name (Last, First, Middle Initial) Brad Powlen Mailing Address 4331 Irish Hills Dr. Apt 3D City South Bend State IN Zip Code 46614 Purpose of Disbursement FEA: Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB30B.88120 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 8	Amount of Each Disbursement this Period 857.36
<b>B.</b>	Full Name (Last, First, Middle Initial) Brandon R. Dickinson Mailing Address 16140 Ditch Rd. City Westfield State IN Zip Code 46074 Purpose of Disbursement FEA: Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB30B.88125 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 8	Amount of Each Disbursement this Period 968.11
<b>C.</b>	Full Name (Last, First, Middle Initial) Brandon R. Dickinson Mailing Address 16140 Ditch Rd. City Westfield State IN Zip Code 46074 Purpose of Disbursement FEA: Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB30B.88126 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 8	Amount of Each Disbursement this Period 1543.85

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

3369.32

**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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

A.	Full Name (Last, First, Middle Initial) Kevin R. Ober	Transaction ID: SB30B.88091
	Mailing Address 12409 Brean Way	Date of Disbursement MM / DD / YYYY 05 / 08 / 2008
	City Fishers State IN Zip Code 46037	Amount of Each Disbursement this Period 2359.84
	Purpose of Disbursement FEA: Payroll	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Kevin R. Ober	Transaction ID: SB30B.88090
	Mailing Address 12409 Brean Way	Date of Disbursement MM / DD / YYYY 05 / 22 / 2008
	City Fishers State IN Zip Code 46037	Amount of Each Disbursement this Period 2359.84
	Purpose of Disbursement FEA: Payroll	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Travis Roll	Transaction ID: SB30B.88063
	Mailing Address 3801 Knickerbocker Place 1C	Date of Disbursement MM / DD / YYYY 05 / 08 / 2008
	City Indianapolis State IN Zip Code 46240	Amount of Each Disbursement this Period 901.57
	Purpose of Disbursement FEA: Payroll	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	5621.25
<b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

A.	Full Name (Last, First, Middle Initial) Travis Roll	Transaction ID: SB30B.88064 Date of Disbursement 05 / 22 / 2008
	Mailing Address 3801 Knickerbocker Place 1C	Amount of Each Disbursement this Period 936.50
	City Indianapolis State IN Zip Code 46240	
	Purpose of Disbursement FEA: Payroll	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Daniel Scott	Transaction ID: SB30B.88048 Date of Disbursement 05 / 08 / 2008
	Mailing Address 4721 Sunset Ave	Amount of Each Disbursement this Period 1100.42
	City Indianapolis State IN Zip Code 46208	
	Purpose of Disbursement FEA: Payroll	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Daniel Scott	Transaction ID: SB30B.88049 Date of Disbursement 05 / 22 / 2008
	Mailing Address 4721 Sunset Ave	Amount of Each Disbursement this Period 1100.43
	City Indianapolis State IN Zip Code 46208	
	Purpose of Disbursement FEA: Payroll	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3137.35
<b>TOTAL</b> 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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

A.	Full Name (Last, First, Middle Initial) Sideline Parking	Transaction ID: SB30B.88118 Date of Disbursement
	Mailing Address 121 E. Maryland St.	<input type="text" value="05"/> / <input type="text" value="01"/> / <input type="text" value="2008"/>
	City Indianapolis State IN Zip Code 46204	Amount of Each Disbursement this Period
	Purpose of Disbursement FEA: Parking Expense	<input type="text" value="900.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Laken Sisko	Transaction ID: SB30B.88056 Date of Disbursement
	Mailing Address 1308 Secretariat Lane	<input type="text" value="05"/> / <input type="text" value="08"/> / <input type="text" value="2008"/>
	City Indianapolis State IN Zip Code 46217	Amount of Each Disbursement this Period
	Purpose of Disbursement FEA: Payroll	<input type="text" value="780.22"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Laken Sisko	Transaction ID: SB30B.88055 Date of Disbursement
	Mailing Address 1308 Secretariat Lane	<input type="text" value="05"/> / <input type="text" value="22"/> / <input type="text" value="2008"/>
	City Indianapolis State IN Zip Code 46217	Amount of Each Disbursement this Period
	Purpose of Disbursement FEA: Payroll	<input type="text" value="1221.79"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

**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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

A.	Full Name (Last, First, Middle Initial) Caitlyn Smeltzer	Transaction ID: SB30B.88060 Date of Disbursement 05 / 08 / 2008
	Mailing Address 106 State Street	
	City LaPorte State IN Zip Code 46350	Amount of Each Disbursement this Period 244.19
	Purpose of Disbursement FEA: Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Caitlyn Smeltzer	Transaction ID: SB30B.88061 Date of Disbursement 05 / 22 / 2008
	Mailing Address 106 State Street	
	City LaPorte State IN Zip Code 46350	Amount of Each Disbursement this Period 244.19
	Purpose of Disbursement FEA: Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Tracy Smith	Transaction ID: SB30B.88109 Date of Disbursement 05 / 08 / 2008
	Mailing Address 3301 Lincoln Hill Rd.	
	City Martinsville State IN Zip Code 46151	Amount of Each Disbursement this Period 1843.31
	Purpose of Disbursement FEA: Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

2331.69

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

A.	Full Name (Last, First, Middle Initial) Tracy Smith <hr/> Mailing Address 3301 Lincoln Hill Rd. <hr/> City Martinsville State IN Zip Code 46151 <hr/> Purpose of Disbursement FEA: Payroll Candidate Name <span style="float: right;">Category/Type</span> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB30B.88110 Date of Disbursement MM / DD / YYYY 05 / 22 / 2008 <hr/> Amount of Each Disbursement this Period 1811.12
B.	Full Name (Last, First, Middle Initial) Mike Sullivan Jr. <hr/> Mailing Address 3466 South Applegate Dr <hr/> City New Palestine State IN Zip Code 46163 <hr/> Purpose of Disbursement FEA: Payroll Candidate Name <span style="float: right;">Category/Type</span> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB30B.88065 Date of Disbursement MM / DD / YYYY 05 / 08 / 2008 <hr/> Amount of Each Disbursement this Period 932.88
C.	Full Name (Last, First, Middle Initial) Mike Sullivan Jr. <hr/> Mailing Address 3466 South Applegate Dr <hr/> City New Palestine State IN Zip Code 46163 <hr/> Purpose of Disbursement FEA: Payroll Candidate Name <span style="float: right;">Category/Type</span> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB30B.88066 Date of Disbursement MM / DD / YYYY 05 / 22 / 2008 <hr/> Amount of Each Disbursement this Period 832.89

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

**3576.89**

**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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

A.	Full Name (Last, First, Middle Initial) Donald T. Kaczorowski	Transaction ID: SB30B.88075 Date of Disbursement 05 / 08 / 2008
	Mailing Address 8726 Garonne Terrace 1B	Amount of Each Disbursement this Period 668.79
	City Indianapolis State IN Zip Code 46250	
	Purpose of Disbursement FEA: Payroll	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Donald T. Kaczorowski	Transaction ID: SB30B.88074 Date of Disbursement 05 / 22 / 2008
	Mailing Address 8726 Garonne Terrace 1B	Amount of Each Disbursement this Period 618.80
	City Indianapolis State IN Zip Code 46250	
	Purpose of Disbursement FEA: Payroll	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) The Lukens Company	Transaction ID: SB30B.88217 Date of Disbursement 05 / 14 / 2008
	Mailing Address 2800 Shirlington Rd 9th floor	Amount of Each Disbursement this Period 5874.31
	City Arlington State VA Zip Code 22206	
	Purpose of Disbursement FEA: State Party Generic Direct Mail	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>7161.90</b>
<b>TOTAL</b> 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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

A.	Full Name (Last, First, Middle Initial) Workers Training Fund	Transaction ID: SB30B.88108 Date of Disbursement
	Mailing Address PO Box 6285	<input type="text" value="05"/> <input type="text" value="23"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Indianapolis State IN Zip Code 46206	Amount of Each Disbursement this Period
	Purpose of Disbursement FEA: Payroll Taxes	<input type="text" value="416.50"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Verizon Wireless - Texas	Transaction ID: SB30B.88101 Date of Disbursement
	Mailing Address P.O. Box 630024	<input type="text" value="05"/> <input type="text" value="02"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Dallas State TX Zip Code 75263	Amount of Each Disbursement this Period
	Purpose of Disbursement FEA: Cell Phones for Generic Phone Banks	<input type="text" value="62.46"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Verizon Wireless - Texas	Transaction ID: SB30B.88099 Date of Disbursement
	Mailing Address P.O. Box 630024	<input type="text" value="05"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Dallas State TX Zip Code 75263	Amount of Each Disbursement this Period
	Purpose of Disbursement FEA: Cell Phones for Generic Phone Banks	<input type="text" value="682.84"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1161.80"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# 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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

A.

Full Name (Last, First, Middle Initial)  
Verizon Wireless - Texas

Transaction ID: SB30B.86817  
Date of Disbursement

Mailing Address P.O. Box 630024

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	0	8

City Dallas State TX Zip Code 75263

Amount of Each Disbursement this Period

197.29
--------

Purpose of Disbursement  
FEA: Cell Phone Expense-Paid by M. Clark

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

[MEMO ITEM]

State: District:

B.

Full Name (Last, First, Middle Initial)  
Verizon Wireless - Texas

Transaction ID: SB30B.88100  
Date of Disbursement

Mailing Address P.O. Box 630024

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	0	8

City Dallas State TX Zip Code 75263

Amount of Each Disbursement this Period

275.58
--------

Purpose of Disbursement  
FEA: Cell Phone Expense

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Wachovia Securities

Transaction ID: SB30B.88116  
Date of Disbursement

Mailing Address 8888 Keystone Crossing, Suite 200

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	9		2	0	0	8

City Indianapolis State IN Zip Code 46240

Amount of Each Disbursement this Period

510.77
--------

Purpose of Disbursement  
FEA: IRA Contributions

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

786.35
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**TOTAL** This Period (last page this line number only) ..... ►

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**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

A.

Full Name (Last, First, Middle Initial)  
Wachovia Securities

Transaction ID: SB30B.88117  
Date of Disbursement

Mailing Address 8888 Keystone Crossing, Suite 200

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	0	8

City Indianapolis State IN Zip Code 46240

Amount of Each Disbursement this Period

510.77
--------

Purpose of Disbursement  
FEA: IRA Contributions

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ..... ►

510.77
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TOTAL This Period (last page this line number only) ..... ►

88443.79
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**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 60 / 107
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Century Computer Products, Inc.	Nature of Debt (Purpose): Toner Expense
Mailing Address 2230 Michigan Ave.	
City State ZIP Code Santa Monica CA 90404	

Outstanding Balance Beginning This Period 1685.25	<b>Transaction ID:</b> SD10.83510	
Amount Incurred This Period 0.00	Payment This Period 561.75	Outstanding Balance at Close of This Period 1123.50

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor FLS Connect	Nature of Debt (Purpose): Generic State Party Telemarketing
Mailing Address 7300 Hudson Blvd, Suite 270	
City State ZIP Code Saint Paul MN 55128	

Outstanding Balance Beginning This Period 5372.10	<b>Transaction ID:</b> SD10.86702	
Amount Incurred This Period 0.00	Payment This Period 5372.10	Outstanding Balance at Close of This Period 0.00

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor FLS Connect	Nature of Debt (Purpose): Generic State Party Telemarketing
Mailing Address 7300 Hudson Blvd, Suite 270	
City State ZIP Code Saint Paul MN 55128	

Outstanding Balance Beginning This Period 1854.15	<b>Transaction ID:</b> SD10.86701	
Amount Incurred This Period 0.00	Payment This Period 1854.15	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	1123.50
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor FLS Connect	Nature of Debt (Purpose): Generic State Party Telemarketing
Mailing Address 7300 Hudson Blvd, Suite 270	
City State ZIP Code Saint Paul MN 55128	

Outstanding Balance Beginning This Period 852.32	<b>Transaction ID:</b> SD10.86699	
Amount Incurred This Period 0.00	Payment This Period 852.32	Outstanding Balance at Close of This Period 0.00

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor FLS Connect	Nature of Debt (Purpose): FEA:Party Telemarketing INB803 (Estimate)
Mailing Address 7300 Hudson Blvd, Suite 270	
City State ZIP Code Saint Paul MN 55128	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID:</b> SD10.88242	
Amount Incurred This Period 5019.60	Payment This Period 0.00	Outstanding Balance at Close of This Period 5019.60

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Resolution Graphics	Nature of Debt (Purpose): Direct Mail Postage
Mailing Address 3725 Dunlap Street	
City State ZIP Code Arden Hills MN 55112	

Outstanding Balance Beginning This Period 2584.00	<b>Transaction ID:</b> SD10.86697	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	5019.60
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 62 / 107
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor SaveltNow	Nature of Debt (Purpose): Office Supplies
Mailing Address 2340 Reliable Parkway	
City State ZIP Code Chicago IL 60686	

Outstanding Balance Beginning This Period 514.96	<b>Transaction ID:</b> SD10.86704	
Amount Incurred This Period 0.00	Payment This Period 514.96	Outstanding Balance at Close of This Period 0.00

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor The Lukens Company	Nature of Debt (Purpose): Generic State Party Direct Mail
Mailing Address 2800 Shirlington Rd 9th floor	
City State ZIP Code Arlington VA 22206	

Outstanding Balance Beginning This Period 5874.31	<b>Transaction ID:</b> SD10.86700	
Amount Incurred This Period 0.00	Payment This Period 5874.31	Outstanding Balance at Close of This Period 0.00

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor The Lukens Company	Nature of Debt (Purpose): Direct Mail (Estimate)
Mailing Address 2800 Shirlington Rd 9th floor	
City State ZIP Code Arlington VA 22206	

Outstanding Balance Beginning This Period 9656.00	<b>Transaction ID:</b> SD10.86698	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 9656.00

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	9656.00
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 63 / 107
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Unisource	Nature of Debt (Purpose): Paper Supplies
Mailing Address PO Box 14761-B	
City State ZIP Code St. Louis MO 63160	

Outstanding Balance Beginning This Period 1000.45	<b>Transaction ID: SD10.86703</b>	
Amount Incurred This Period 0.00	Payment This Period 1000.45	Outstanding Balance at Close of This Period 0.00

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Unisource	Nature of Debt (Purpose): Copier Paper
Mailing Address PO Box 14761-B	
City State ZIP Code St. Louis MO 63160	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID: SD10.88241</b>	
Amount Incurred This Period 1200.54	Payment This Period 0.00	Outstanding Balance at Close of This Period 1200.54

1) <b>SUBTOTALS</b> This Period This Page (optional).....	1200.54
2) <b>TOTALS</b> This Period (last page this line number only).....	16999.64
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	16999.64

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Indiana Republican State Committee, Inc.	FEC IDENTIFICATION NUMBER <b>C</b> C00006486
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
FLS Connect

---

Mailing Address  
7300 Hudson Blvd, Suite 270

---

City	State	Zip Code
Saint Paul	MN	55128

---

Purpose of Expenditure Telemarketing INB803 - Estimate	Category/ Type
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---

Name of Federal Candidate supported or Opposed by expenditure:  
JOHN S MCCAIN

---

Calendar Year-To-Date Per Election for Office Sought	2584.00
---	---------

Date  
M M / D D / Y Y Y Y  
0 5 / 2 7 / 2 0 0 8

---

Amount  
1673.20

---

Transaction ID: SE.86705

---

Office Sought:  House State: IN  
 Senate District: \_\_\_\_\_  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2008  
**[MEMO ITEM]**

Full Name (Last, First, Middle, Initial) of Payee  
FLS Connect

---

Mailing Address  
7300 Hudson Blvd, Suite 270

---

City	State	Zip Code
Saint Paul	MN	55128

---

Purpose of Expenditure Telemarketing INB803 - Estimate	Category/ Type
--	-------------------

---

Name of Federal Candidate supported or Opposed by expenditure:  
BARACK OBAMA

---

Calendar Year-To-Date Per Election for Office Sought	2584.00
---	---------

Date  
M M / D D / Y Y Y Y  
0 5 / 2 7 / 2 0 0 8

---

Amount  
1673.20

---

Transaction ID: SE.86706

---

Office Sought:  House State: IN  
 Senate District: \_\_\_\_\_  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2008  
**[MEMO ITEM]**

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Todd Huston  
Signature

Date M M / D D / Y Y Y Y  
0 6 / 1 7 / 2 0 0 8



# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Indiana Republican State Committee, Inc.	FEC IDENTIFICATION NUMBER <b>C</b> C00006486
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
FLS Connect

---

Mailing Address  
7300 Hudson Blvd, Suite 270

---

City Saint Paul	State MN	Zip Code 55128
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---

Purpose of Expenditure Telemarketing INB803 - Estimate	Category/ Type
--	-------------------

---

Name of Federal Candidate supported or Opposed by expenditure:  
HILLARY RODHAM CLINTON

---

Calendar Year-To-Date Per Election for Office Sought	2584.00
---	---------

Date  
M M / D D / Y Y Y Y  
0 5 / 2 7 / 2 0 0 8

---

Amount  
1673.20

**Transaction ID:** SE.86708

---

Office Sought:  House State: IN  
 Senate District: \_\_\_\_\_  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2008  
**[MEMO ITEM]**

Full Name (Last, First, Middle, Initial) of Payee  
Resolution Graphics

---

Mailing Address  
3725 Dunlap Street

---

City Arden Hills	State MN	Zip Code 55112
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---

Purpose of Expenditure State Party Direct Mail Postage	Category/ Type
--	-------------------

---

Name of Federal Candidate supported or Opposed by expenditure:  
BARACK OBAMA

---

Calendar Year-To-Date Per Election for Office Sought	861.34
---	--------

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

---

Amount  
861.34

**Transaction ID:** SE.84977

---

Office Sought:  House State: IN  
 Senate District: \_\_\_\_\_  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2008

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	861.34
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Todd Huston  
Signature

Date M M / D D / Y Y Y Y  
0 6 / 1 7 / 2 0 0 8

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Indiana Republican State Committee, Inc.	FEC IDENTIFICATION NUMBER <b>C</b> C00006486
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
Resolution Graphics

---

Mailing Address  
3725 Dunlap Street

---

City Arden Hills	State MN	Zip Code 55112
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Purpose of Expenditure State Party Direct Mail Postage	Category/ Type
--	-------------------

---

Name of Federal Candidate supported or Opposed by expenditure:  
HILLARY RODHAM CLINTON

---

Calendar Year-To-Date Per Election for Office Sought	1722.67
---	---------

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

Amount  
861.33

**Transaction ID:** SE.84982

Office Sought:  House State: IN  
 Senate District: \_\_\_\_\_  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2008

Full Name (Last, First, Middle, Initial) of Payee  
Resolution Graphics

---

Mailing Address  
3725 Dunlap Street

---

City Arden Hills	State MN	Zip Code 55112
---------------------	-------------	-------------------

---

Purpose of Expenditure State Party Direct Mail Postage	Category/ Type
--	-------------------

---

Name of Federal Candidate supported or Opposed by expenditure:  
JOHN S MCCAIN

---

Calendar Year-To-Date Per Election for Office Sought	2584.00
---	---------

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

Amount  
861.33

**Transaction ID:** SE.84985

Office Sought:  House State: IN  
 Senate District: \_\_\_\_\_  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2008

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	1722.66
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Todd Huston  
Signature

Date M M / D D / Y Y Y Y  
0 6 / 1 7 / 2 0 0 8

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Indiana Republican State Committee, Inc.	FEC IDENTIFICATION NUMBER <b>C</b> C00006486
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
The Lukens Company

Mailing Address  
2800 Shirlington Rd 9th floor

City State Zip Code  
Arlington VA 22206

Purpose of Expenditure  
State Party Direct Mail (Estimate) Category/Type

Name of Federal Candidate supported or Opposed by expenditure:  
JOHN S MCCAIN

Calendar Year-To-Date Per Election for Office Sought 2584.00

Date  
MM / DD / YYYY  
05 / 05 / 2008

Amount  
3218.67

Transaction ID: SE.86828

Office Sought:  House State: IN  
 Senate District: \_\_\_\_\_  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2008 **[MEMO ITEM]**

Full Name (Last, First, Middle, Initial) of Payee  
The Lukens Company

Mailing Address  
2800 Shirlington Rd 9th floor

City State Zip Code  
Arlington VA 22206

Purpose of Expenditure  
State Party Direct Mail - Estimate Category/Type

Name of Federal Candidate supported or Opposed by expenditure:  
HILLARY RODHAM CLINTON

Calendar Year-To-Date Per Election for Office Sought 2584.00

Date  
MM / DD / YYYY  
05 / 05 / 2008

Amount  
3218.67

Transaction ID: SE.86830

Office Sought:  House State: IN  
 Senate District: \_\_\_\_\_  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2008 **[MEMO ITEM]**

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Todd Huston  
Signature

Date MM / DD / YYYY  
06 / 17 / 2008

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Indiana Republican State Committee, Inc.		FEC IDENTIFICATION NUMBER <b>C</b> C00006486	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee The Lukens Company		Date M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 8	
Mailing Address 2800 Shirlington Rd 9th floor		Amount 3218.66	
City Arlington		Transaction ID: SE.86831	
State VA		Office Sought: <input type="checkbox"/> House State: <u>IN</u>	
Zip Code 22206		<input type="checkbox"/> Senate District: _____	
Purpose of Expenditure State Party Direct Mail (Estimate)		<input checked="" type="checkbox"/> Presidential	
Category/ Type		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
Calendar Year-To-Date Per Election for Office Sought		<input type="checkbox"/> Other (specify) : _____ 2008	
		<b>[MEMO ITEM]</b>	
		2584.00	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	2584.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Todd Huston Signature	Date M M / D D / Y Y Y Y 0 6 / 1 7 / 2 0 0 8

**SCHEDULE F (FEC Form 3X)**  
**ITEMIZED COORDINATED EXPENDITURES MADE BY**  
**POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)**  
**ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE**  
**(2 U.S.C. §441a(d))** (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) Indiana Republican State Committee, Inc.		<input type="checkbox"/> Check if 24-hour notice
Has your committee been designated to make coordinated expenditures by a political party committee? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, name the designating committee:	Full Name of Subordinate Committee	
	Mailing Address	
	City	State      ZIP Code

Full Name (Last, First, Middle Initial) of Each Payee Verizon Wireless - Texas		Purpose of Expenditure Cell Phones for Volunteer Phone Banks	<input type="checkbox"/>
Mailing Address P.O. Box 630024		Category/Type	
City	State	ZIP Code	Date
Dallas	TX	75263	M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 8
Name of Federal Candidate Supported	Office Sought:	House Senate Presidential	State: IN District: 09
MICHAEL E. SODREL			
Aggregate General Election Expenditure for this Candidate ▶		469.71	<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)
		<b>Transaction ID: SF.88243</b>	

Full Name (Last, First, Middle Initial) of Each Payee Verizon Wireless - Texas		Purpose of Expenditure Cell Phones for Volunteer Phone Banks	<input type="checkbox"/>
Mailing Address P.O. Box 630024		Category/Type	
City	State	ZIP Code	Date
Dallas	TX	75263	M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 8
Name of Federal Candidate Supported	Office Sought:	House Senate Presidential	State: IN District: 09
MICHAEL E. SODREL			
Aggregate General Election Expenditure for this Candidate ▶		66.56	<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)
		<b>Transaction ID: SF.88244</b>	

Full Name (Last, First, Middle Initial) of Each Payee Verizon Wireless - Texas		Purpose of Expenditure Cell Phones for Volunteer Phone Banks	<input type="checkbox"/>
Mailing Address P.O. Box 630024		Category/Type	
City	State	ZIP Code	Date
Dallas	TX	75263	M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 8
Name of Federal Candidate Supported	Office Sought:	House Senate Presidential	State: IN District: 08
GREGORY JUSTIN GOODE			
Aggregate General Election Expenditure for this Candidate ▶		231.75	<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)
		<b>Transaction ID: SF.88245</b>	

<b>SUBTOTAL</b> of Expenditures This Page (optional) .....	<b>768.02</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE F (FEC Form 3X)**  
**ITEMIZED COORDINATED EXPENDITURES MADE BY**  
**POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)**  
**ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE**  
**(2 U.S.C. §441a(d))** (To be used only by Political Committees in the General Election)

PAGE 70 / 107  
 FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) Indiana Republican State Committee, Inc.		<input type="checkbox"/> Check if 24-hour notice
Has your committee been designated to make coordinated expenditures by a political party committee? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Full Name of Subordinate Committee	
If YES, name the designating committee:	Mailing Address	
	City	State      ZIP Code

Full Name (Last, First, Middle Initial) of Each Payee Verizon Wireless - Texas		Purpose of Expenditure Cell Phones for Volunteer Phone Banks	<input type="checkbox"/> Category/Type
Mailing Address P.O. Box 630024		Date M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 8	
City Dallas	State TX	ZIP Code 75263	
Name of Federal Candidate Supported LUKE WAYNE PUCKETT	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: IN District: 02	Amount 49.92
Aggregate General Election Expenditure for this Candidate ▶		49.92	<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)
<b>Transaction ID: SF.88247</b>			

<b>SUBTOTAL</b> of Expenditures This Page (optional) .....	<b>49.92</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>817.94</b>

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
 Indiana Republican State Committee, Inc.

NAME OF ACCOUNT Indiana Republican Party State Fund	DATE OF RECEIPT M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 8	TOTAL AMOUNT TRANSFERRED 26078.38
--	---	--------------------------------------

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	26078.38	Transaction ID: H3.88042
<b>ii) Generic Voter Drive</b> .....		Transaction ID:
<b>iii) Exempt Activities</b> .....		Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)		Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	26078.38
<b>TOTAL</b> This Period (Generic Voter Drive) .....	0.00
<b>TOTAL</b> This Period (Exempt Activities) .....	0.00
<b>TOTAL</b> This Period (Direct Fundraising) .....	0.00
<b>TOTAL</b> This Period (Direct Candidate Support) .....	0.00
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	0.00
<b>TOTAL</b> This Period (Total Amount Transferred) .....	26078.38

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

<b>A. Full Name (Last, First, Middle Initial)</b> Bodner Opera House, LLC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address One N. Meridian St.   Suite 300			Allocated Activity or Event Year-To-Date 188076.88		
City Indianapolis	State IN	Zip Code 46204	Date <input type="text" value="05"/> / <input type="text" value="01"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: May Rent			Transaction ID: H4.88172		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4935.51		12691.31		17626.82

<b>B. Full Name (Last, First, Middle Initial)</b> SaveltNow			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2340 Reliable Parkway			Allocated Activity or Event Year-To-Date 188591.84		
City Chicago	State IL	Zip Code 60686	Date <input type="text" value="05"/> / <input type="text" value="01"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Office Supplies			Transaction ID: H4.88219		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
144.19		370.77		514.96

<b>C. Full Name (Last, First, Middle Initial)</b> Cinergy			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 5856 West 74 Street			Allocated Activity or Event Year-To-Date 189166.79		
City Indianapolis	State IN	Zip Code 46278	Date <input type="text" value="05"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Monthly Phone Expense			Transaction ID: H4.88134		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
160.99		413.96		574.95

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5240.69		13476.04		18716.73

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

<b>A. Full Name (Last, First, Middle Initial)</b> U.S. Postmaster-- Meridian			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 456 N. Meridian St.			Allocated Activity or Event Year-To-Date 189666.79		
City Indianapolis	State IN	Zip Code 46204	Date <input type="text" value="05"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: BRE Postage			Transaction ID: H4.88168		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
140.00		360.00		500.00

<b>B. Full Name (Last, First, Middle Initial)</b> Speedway Gas Station			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 8202 Allisonville Road			Allocated Activity or Event Year-To-Date 189666.79		
City Indianapolis	State IN	Zip Code 46250	Date <input type="text" value="05"/> / <input type="text" value="08"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Gas Expense-Paid by L. Sisko			Transaction ID: H4.86797		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.20		10.80		15.00

<b>C. Full Name (Last, First, Middle Initial)</b> Sam's Club			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 9001152			Allocated Activity or Event Year-To-Date 189666.79		
City Louisville	State KY	Zip Code 40290	Date <input type="text" value="05"/> / <input type="text" value="08"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Kitchen Supplies - Paid by T. Smith			Transaction ID: H4.86798		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
31.72		81.56		113.28

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
140.00		360.00		500.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

<b>A. Full Name (Last, First, Middle Initial)</b> Marathon Ashland			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 9322 W. 30th St.			Allocated Activity or Event Year-To-Date 189666.79		
City Indianapolis	State IN	Zip Code 46234	Date MM / DD / YYYY 05 / 08 / 2008		
Purpose of Disbursement: Gas Expense - Paid by M. Maday			Transaction ID: H4.86799		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.40		21.60		30.00

<b>B. Full Name (Last, First, Middle Initial)</b> Kwik Mart			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2603 S Michigan St.			Allocated Activity or Event Year-To-Date 189666.79		
City South Bend	State IN	Zip Code 46614	Date MM / DD / YYYY 05 / 08 / 2008		
Purpose of Disbursement: Gas Expense - Paid by B. Dickinson			Transaction ID: H4.86800		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.90		30.60		42.50

<b>C. Full Name (Last, First, Middle Initial)</b> LaPorte County Republican Party Central Committee			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 814 Jefferson			Allocated Activity or Event Year-To-Date 189666.79		
City LaPorte	State IN	Zip Code 46350	Date MM / DD / YYYY 05 / 08 / 2008		
Purpose of Disbursement: Lincoln Day Dinner- Paid by B. Powlen			Transaction ID: H4.86801		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.40		21.60		30.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

**A. Full Name (Last, First, Middle Initial)**  
Wabash County Republican Party Central Committee

Mailing Address  
1409 N Market Street

City	State	Zip Code	Category/ Type
North Manchester	IN	46962	

Purpose of Disbursement:  
Lincoln Day Dinner-Paid by B. Powlen

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative     Fundraising     Exempt  
 Voter Drive     Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
189666.79

Date  /  /   
**Transaction ID:** H4.86802

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.00		18.00		25.00

**B. Full Name (Last, First, Middle Initial)**  
Marriott Hotels - South Bend

Mailing Address  
123 N. St. Joseph St.

City	State	Zip Code	Category/ Type
South Bend	IN	46601	

Purpose of Disbursement:  
Lodging Expense-Paid by D. Scott

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative     Fundraising     Exempt  
 Voter Drive     Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
189666.79

Date  /  /   
**Transaction ID:** H4.86803

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
39.89		102.58		142.47

**C. Full Name (Last, First, Middle Initial)**  
Verizon Wireless - Texas

Mailing Address  
P.O. Box 630024

City	State	Zip Code	Category/ Type
Dallas	TX	75263	

Purpose of Disbursement:  
Cell Phone Chargers - Paid by T. Roll

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative     Fundraising     Exempt  
 Voter Drive     Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
189666.79

Date  /  /   
**Transaction ID:** H4.86804

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
32.35		83.17		115.52

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

<b>A. Full Name (Last, First, Middle Initial)</b> Daniel Scott			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4721 Sunset Ave			Allocated Activity or Event Year-To-Date 189809.26		
City Indianapolis	State IN	Zip Code 46208	Date <input type="text" value="05"/> / <input type="text" value="08"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Lodging Reimbursement			Transaction ID: H4.88130		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
39.89		102.58		142.47

<b>B. Full Name (Last, First, Middle Initial)</b> Jay Kenworthy			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 6762 Lexington Circle			Allocated Activity or Event Year-To-Date 189884.86		
City Zionsville	State IN	Zip Code 46077	Date <input type="text" value="05"/> / <input type="text" value="08"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Mileage Reimbursement			Transaction ID: H4.88133		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.17		54.43		75.60

<b>C. Full Name (Last, First, Middle Initial)</b> Laken Sisko			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1308 Secretariat Lane			Allocated Activity or Event Year-To-Date 189927.86		
City Indianapolis	State IN	Zip Code 46217	Date <input type="text" value="05"/> / <input type="text" value="08"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Gas & Mileage Reimbursement			Transaction ID: H4.88136		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.04		30.96		43.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
73.10		187.97		261.07

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

<b>A. Full Name (Last, First, Middle Initial)</b> Caitlyn Smeltzer			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 106 State Street			Allocated Activity or Event Year-To-Date 190109.36		
City LaPorte	State IN	Zip Code 46350	Date <input type="text" value="05"/> / <input type="text" value="08"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Mileage Reimbursement			Transaction ID: H4.88137		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
50.82		130.68		181.50

<b>B. Full Name (Last, First, Middle Initial)</b> Travis Roll			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3801 Knickerbocker Place 1C			Allocated Activity or Event Year-To-Date 190871.38		
City Indianapolis	State IN	Zip Code 46240	Date <input type="text" value="05"/> / <input type="text" value="08"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Mileage & Cell Chargers Reimbursement			Transaction ID: H4.88139		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
213.37		548.65		762.02

<b>C. Full Name (Last, First, Middle Initial)</b> Mike Sullivan Jr.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3466 South Applegate Dr			Allocated Activity or Event Year-To-Date 191090.38		
City New Palestine	State IN	Zip Code 46163	Date <input type="text" value="05"/> / <input type="text" value="08"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Mileage Reimbursement			Transaction ID: H4.88142		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
61.32		157.68		219.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
325.51		837.01		1162.52

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

<b>A. Full Name (Last, First, Middle Initial)</b> Stacey E. Perry			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 18947 Prairie Crossing Dr.			Allocated Activity or Event Year-To-Date 191104.78		
City Noblesville	State IN	Zip Code 46062	Date <input type="text" value="05"/> / <input type="text" value="08"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Mileage Reimbursement			Transaction ID: H4.88146		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.03		10.37		14.40

<b>B. Full Name (Last, First, Middle Initial)</b> Matt Maday			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 6001 Crittenden Ave.			Allocated Activity or Event Year-To-Date 191210.38		
City Indianapolis	State IN	Zip Code 46220	Date <input type="text" value="05"/> / <input type="text" value="08"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Mileage & Gas Reimbursement			Transaction ID: H4.88148		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
29.57		76.03		105.60

<b>C. Full Name (Last, First, Middle Initial)</b> Teresa E. Buckley			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 5335 Norwaldo Ave.			Allocated Activity or Event Year-To-Date 191419.78		
City Indianapolis	State IN	Zip Code 46220	Date <input type="text" value="05"/> / <input type="text" value="08"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Mileage Reimbursement			Transaction ID: H4.88152		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
58.63		150.77		209.40

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
92.23		237.17		329.40

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

# SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

**A. Full Name (Last, First, Middle Initial)**  
Barbara L. McClellan

Mailing Address  
1017 Liberty Dr.

City State Zip Code  
Westfield IN 46074

Purpose of Disbursement:  
Mileage Reimbursement

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

191619.38

Date 05 / 08 / 2008

Transaction ID: H4.88156

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
55.89		143.71		199.60

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

Mailing Address  
3301 Lincoln Hill Rd.

City State Zip Code  
Martinsville IN 46151

Purpose of Disbursement:  
Kitchen Supplies Reimbursement

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

191732.66

Date 05 / 08 / 2008

Transaction ID: H4.88171

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
31.72		81.56		113.28

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

Mailing Address  
4331 Irish Hills Dr. Apt 3D

City State Zip Code  
South Bend IN 46614

Purpose of Disbursement:  
Meals & Mileage Reimbursement

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

192510.66

Date 05 / 08 / 2008

Transaction ID: H4.88185

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
217.84		560.16		778.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
305.45		785.43		1090.88

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

<b>A. Full Name (Last, First, Middle Initial)</b> Brandon R. Dickinson			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 16140 Ditch Rd.			Allocated Activity or Event Year-To-Date 192553.16	
City Westfield	State IN	Zip Code 46074	Category/ Type	
Purpose of Disbursement: Gas Reimbursement				
Activity or Event Identifier: Administrative			Date <input type="text" value="05"/> / <input type="text" value="08"/> / <input type="text" value="2008"/> <b>Transaction ID:</b> H4.88188	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="11.90"/>		<input type="text" value="30.60"/>		<input type="text" value="42.50"/>

<b>B. Full Name (Last, First, Middle Initial)</b> Matthew Kirby			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 25 E. 40th St., 2F			Allocated Activity or Event Year-To-Date 192819.56	
City Indianapolis	State IN	Zip Code 46205	Category/ Type	
Purpose of Disbursement: Mileage Reimbursement				
Activity or Event Identifier: Administrative			Date <input type="text" value="05"/> / <input type="text" value="08"/> / <input type="text" value="2008"/> <b>Transaction ID:</b> H4.88189	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="74.59"/>		<input type="text" value="191.81"/>		<input type="text" value="266.40"/>

<b>C. Full Name (Last, First, Middle Initial)</b> LexisNexis			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 2314			Allocated Activity or Event Year-To-Date 193084.56	
City Carol Stream	State IN	Zip Code 60132	Category/ Type	
Purpose of Disbursement: News Clipping Charges				
Activity or Event Identifier: Administrative			Date <input type="text" value="05"/> / <input type="text" value="09"/> / <input type="text" value="2008"/> <b>Transaction ID:</b> H4.88141	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="74.20"/>		<input type="text" value="190.80"/>		<input type="text" value="265.00"/>

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="160.69"/>		<input type="text" value="413.21"/>		<input type="text" value="573.90"/>

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

<b>A. Full Name (Last, First, Middle Initial)</b> Ikon Office Solution			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 810 Gears Road			Allocated Activity or Event Year-To-Date 197330.20		
City Houston	State TX	Zip Code 77067	Date <input type="text" value="05"/> / <input type="text" value="09"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Copier Rental			Transaction ID: H4.88164		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1188.78		3056.86		4245.64

<b>B. Full Name (Last, First, Middle Initial)</b> ProNet Communications, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3290 Blazer Parkway Suite 201			Allocated Activity or Event Year-To-Date 197454.36		
City Lexington	State KY	Zip Code 40509	Date <input type="text" value="05"/> / <input type="text" value="09"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Long Distance Expense			Transaction ID: H4.88179		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
34.76		89.40		124.16

<b>C. Full Name (Last, First, Middle Initial)</b> Infinisource, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 15 E Washington Street			Allocated Activity or Event Year-To-Date 197498.36		
City Coldwater	State MI	Zip Code 49036	Date <input type="text" value="05"/> / <input type="text" value="09"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Monthly Cobra Compliance Consult Fees			Transaction ID: H4.88180		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.32		31.68		44.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1235.86		3177.94		4413.80

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

<b>A. Full Name (Last, First, Middle Initial)</b> SaveltNow			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2340 Reliable Parkway			Allocated Activity or Event Year-To-Date 197576.89		
City Chicago	State IL	Zip Code 60686	Date <input type="text" value="05"/> / <input type="text" value="09"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Office Supplies			Transaction ID: H4.88183		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.99		56.54		78.53

<b>B. Full Name (Last, First, Middle Initial)</b> Century Computer Products, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2230 Michigan Ave.			Allocated Activity or Event Year-To-Date 198138.64		
City Santa Monica	State CA	Zip Code 90404	Date <input type="text" value="05"/> / <input type="text" value="09"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Toner Expense			Transaction ID: H4.88214		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
157.29		404.46		561.75

<b>C. Full Name (Last, First, Middle Initial)</b> Unisource			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 14761-B			Allocated Activity or Event Year-To-Date 199139.09		
City St. Louis	State MO	Zip Code 63160	Date <input type="text" value="05"/> / <input type="text" value="09"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Copier Paper			Transaction ID: H4.88218		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
280.13		720.32		1000.45

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
459.41		1181.32		1640.73

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

<b>A. Full Name (Last, First, Middle Initial)</b> Cinergy			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 5856 West 74 Street			Allocated Activity or Event Year-To-Date 199228.28		
City Indianapolis	State IN	Zip Code 46278	Date <input type="text" value="05"/> / <input type="text" value="14"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Monthly Phone Expense			Transaction ID: H4.88135		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.97		64.22		89.19

<b>B. Full Name (Last, First, Middle Initial)</b> The Frank Irish Co.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 19029			Allocated Activity or Event Year-To-Date 199466.66		
City Indianapolis	State IN	Zip Code 46219	Date <input type="text" value="05"/> / <input type="text" value="14"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Sink Repairs			Transaction ID: H4.88145		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
66.75		171.63		238.38

<b>C. Full Name (Last, First, Middle Initial)</b> Aspen Publishers			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 7201 McKinney Circle			Allocated Activity or Event Year-To-Date 199737.44		
City Frederick	State MD	Zip Code 21704	Date <input type="text" value="05"/> / <input type="text" value="14"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Employment Law Handbook			Transaction ID: H4.88155		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
75.82		194.96		270.78

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
167.54		430.81		598.35

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

<b>A. Full Name (Last, First, Middle Initial)</b> Marlin Leasing			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 13604			Allocated Activity or Event Year-To-Date 200679.18		
City Philadelphia	State PA	Zip Code 19101	Date <input type="text" value="05"/> / <input type="text" value="14"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Copier Rental			Transaction ID: H4.88175		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
263.69		678.05		941.74

<b>B. Full Name (Last, First, Middle Initial)</b> Ordinance Violations Bureau			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 50 N. Alabama St.			Allocated Activity or Event Year-To-Date 200704.18		
City Indianapolis	State IN	Zip Code 46204	Date <input type="text" value="05"/> / <input type="text" value="14"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: False Alarm Citation			Transaction ID: H4.88176		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.00		18.00		25.00

<b>C. Full Name (Last, First, Middle Initial)</b> SaveltNow			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2340 Reliable Parkway			Allocated Activity or Event Year-To-Date 200757.67		
City Chicago	State IL	Zip Code 60686	Date <input type="text" value="05"/> / <input type="text" value="14"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Office Supplies			Transaction ID: H4.88181		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.98		38.51		53.49

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
285.67		734.56		1020.23

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

**A. Full Name (Last, First, Middle Initial)**  
Staples  
Mailing Address  
3250 W. 86th Street  
City State Zip Code  
Indianapolis IN 46268  
Purpose of Disbursement:  
Toner Expense - Paid by B. McClellan  
Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
Allocated Activity or Event Year-To-Date  
200757.67  
Date 05 / 22 / 2008  
Transaction ID: H4.86805

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.91		53.77		74.68

**B. Full Name (Last, First, Middle Initial)**  
Village Pantry  
Mailing Address  
2001 East 62nd Street  
City State Zip Code  
Indianapolis IN 46220  
Purpose of Disbursement:  
Gas Expense-Paid by M. Maday  
Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
Allocated Activity or Event Year-To-Date  
200757.67  
Date 05 / 22 / 2008  
Transaction ID: H4.86806

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.92		28.09		39.01

**C. Full Name (Last, First, Middle Initial)**  
Merchants Garage  
Mailing Address  
31 South Meridian St.  
City State Zip Code  
Indianapolis IN 46200  
Purpose of Disbursement:  
Parking Expense-Paid by B. Powlen  
Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
Allocated Activity or Event Year-To-Date  
200757.67  
Date 05 / 22 / 2008  
Transaction ID: H4.86807

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.40		3.60		5.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

<b>A. Full Name (Last, First, Middle Initial)</b> Marathon Ashland			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 9322 W. 30th St.			Allocated Activity or Event Year-To-Date 200757.67	
City Indianapolis	State IN	Zip Code 46234	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 0 5 / 2 2 / 2 0 0 8 <b>Transaction ID:</b> H4.86808	
Purpose of Disbursement: Gas Expense - Paid by B. Powlen				
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.44		34.57		48.01

<b>B. Full Name (Last, First, Middle Initial)</b> Village Pantry			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2001 East 62nd Street			Allocated Activity or Event Year-To-Date 200757.67	
City Indianapolis	State IN	Zip Code 46220	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 0 5 / 2 2 / 2 0 0 8 <b>Transaction ID:</b> H4.86809	
Purpose of Disbursement: Gas Expense - Paid by B. Powlen				
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.48		29.52		41.00

<b>C. Full Name (Last, First, Middle Initial)</b> Speedway Gas Station			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 8202 Allisonville Road			Allocated Activity or Event Year-To-Date 200757.67	
City Indianapolis	State IN	Zip Code 46250	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 0 5 / 2 2 / 2 0 0 8 <b>Transaction ID:</b> H4.86810	
Purpose of Disbursement: Gas Expense - Paid by B. Powlen				
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.04		30.96		43.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Sideline Parking

Mailing Address  
121 E. Maryland St.

City State Zip Code  
Indianapolis IN 46204

Purpose of Disbursement:  
Parking Expense - Paid by T. Roll

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

200757.67

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Date 05 / 22 / 2008

Transaction ID: H4.86811

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT  
2.24 + 5.76 = 8.00

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

Mailing Address  
31 South Meridian St.

City State Zip Code  
Indianapolis IN 46200

Purpose of Disbursement:  
Parking Expense - Paid by T. Roll

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

200757.67

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Date 05 / 22 / 2008

Transaction ID: H4.86812

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT  
5.04 + 12.96 = 18.00

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

Mailing Address  
117 W Charles St.

City State Zip Code  
Muncie IN 47305

Purpose of Disbursement:  
Meals Expense - Paid by M. Sullivan

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

200757.67

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Date 05 / 22 / 2008

Transaction ID: H4.86813

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT  
7.84 + 20.16 = 28.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT  
0.00 + 0.00 = 0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

**A. Full Name (Last, First, Middle Initial)**  
Arby's

Mailing Address  
45 E South St.

City State Zip Code  
Indianapolis IN 46225

Purpose of Disbursement:  
Meals Expense - Paid by D. Scott

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

200757.67

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Date 05 / 22 / 2008

Transaction ID: H4.86815

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.99		5.10		7.09

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

Mailing Address  
6225 Lima Rd

City State Zip Code  
Ft. Wayne IN 46818

Purpose of Disbursement:  
Meals Expense - Paid by D. Scott

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

200757.67

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Date 05 / 22 / 2008

Transaction ID: H4.86816

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.84		4.74		6.58

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

Mailing Address  
4721 Sunset Ave

City State Zip Code  
Indianapolis IN 46208

Purpose of Disbursement:  
Mileage & Meals Reimbursement

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

200852.64

Activity or Event Identifier:  
Administrative

Date 05 / 22 / 2008

Transaction ID: H4.88131

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
26.59		68.38		94.97

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
26.59		68.38		94.97

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

<b>A. Full Name (Last, First, Middle Initial)</b> Jay Kenworthy			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 6762 Lexington Circle			Allocated Activity or Event Year-To-Date 200929.44		
City	State	Zip Code	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Zionsville	IN	46077	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Disbursement: Mileage Reimbursement			Transaction ID: H4.88132		
Activity or Event Identifier: Administrative			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Date <input type="text"/> / <input type="text"/> / <input type="text"/>			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.50		55.30		76.80

<b>B. Full Name (Last, First, Middle Initial)</b> Caitlyn Smeltzer			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 106 State Street			Allocated Activity or Event Year-To-Date 201134.64		
City	State	Zip Code	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
LaPorte	IN	46350	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Disbursement: Mileage Reimbursement			Transaction ID: H4.88138		
Activity or Event Identifier: Administrative			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Date <input type="text"/> / <input type="text"/> / <input type="text"/>			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
57.46		147.74		205.20

<b>C. Full Name (Last, First, Middle Initial)</b> Travis Roll			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3801 Knickerbocker Place 1C			Allocated Activity or Event Year-To-Date 201713.24		
City	State	Zip Code	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Indianapolis	IN	46240	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Disbursement: Parking & Mileage Reimbursement			Transaction ID: H4.88140		
Activity or Event Identifier: Administrative			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Date <input type="text"/> / <input type="text"/> / <input type="text"/>			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
162.01		416.59		578.60

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
240.97		619.63		860.60

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

<b>A. Full Name (Last, First, Middle Initial)</b> Mike Sullivan Jr.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3466 South Applegate Dr			Allocated Activity or Event Year-To-Date 201846.24		
City New Palestine	State IN	Zip Code 46163	Date <input type="text" value="05"/> / <input type="text" value="22"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Mileage & Meals Reimbursement			Transaction ID: H4.88143		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.24		95.76		133.00

<b>B. Full Name (Last, First, Middle Initial)</b> Matt Maday			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 6001 Crittenden Ave.			Allocated Activity or Event Year-To-Date 201889.45		
City Indianapolis	State IN	Zip Code 46220	Date <input type="text" value="05"/> / <input type="text" value="22"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Mileage & Gas Reimbursement			Transaction ID: H4.88149		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.10		31.11		43.21

<b>C. Full Name (Last, First, Middle Initial)</b> Teresa E. Buckley			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 5335 Norwaldo Ave.			Allocated Activity or Event Year-To-Date 202320.55		
City Indianapolis	State IN	Zip Code 46220	Date <input type="text" value="05"/> / <input type="text" value="22"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Mileage Reimbursement			Transaction ID: H4.88153		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
120.71		310.39		431.10

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
170.05		437.26		607.31

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

<b>A. Full Name (Last, First, Middle Initial)</b> Barbara L. McClellan			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1017 Liberty Dr.			Allocated Activity or Event Year-To-Date 202395.23		
City	State	Zip Code	Category/ Type		
Westfield	IN	46074			
Purpose of Disbursement: Toner Reimbursement			Date <input type="text" value="05"/> / <input type="text" value="22"/> / <input type="text" value="2008"/>		
Activity or Event Identifier: Administrative			Transaction ID: H4.88157		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="20.91"/>		<input type="text" value="53.77"/>		<input type="text" value="74.68"/>

<b>B. Full Name (Last, First, Middle Initial)</b> Kevin R. Ober			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 12409 Brean Way			Allocated Activity or Event Year-To-Date 202459.73		
City	State	Zip Code	Category/ Type		
Fishers	IN	46037			
Purpose of Disbursement: Mileage Reimbursement			Date <input type="text" value="05"/> / <input type="text" value="22"/> / <input type="text" value="2008"/>		
Activity or Event Identifier: Administrative			Transaction ID: H4.88159		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="18.06"/>		<input type="text" value="46.44"/>		<input type="text" value="64.50"/>

<b>C. Full Name (Last, First, Middle Initial)</b> Brad Powlen			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4331 Irish Hills Dr. Apt 3D			Allocated Activity or Event Year-To-Date 202975.34		
City	State	Zip Code	Category/ Type		
South Bend	IN	46614			
Purpose of Disbursement: Parking, Gas & Mileage Reimbursement			Date <input type="text" value="05"/> / <input type="text" value="22"/> / <input type="text" value="2008"/>		
Activity or Event Identifier: Administrative			Transaction ID: H4.88184		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="144.37"/>		<input type="text" value="371.24"/>		<input type="text" value="515.61"/>

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="183.34"/>		<input type="text" value="471.45"/>		<input type="text" value="654.79"/>

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<input type="text"/>		<input type="text"/>		<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

<b>A. Full Name (Last, First, Middle Initial)</b> Galveston Steakhouse			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 10 Commerce Square			Allocated Activity or Event Year-To-Date 202975.34	
City	State	Zip Code	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 0 5 / 2 3 / 2 0 0 8 <b>Transaction ID:</b> H4.86767	
Michigan City	IN	46360		
Purpose of Disbursement: Meals Expense			Category/ Type	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.50		34.71		48.21

<b>B. Full Name (Last, First, Middle Initial)</b> Woodward's Ace Hardware			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 10093			Allocated Activity or Event Year-To-Date 202975.34	
City	State	Zip Code	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 0 5 / 2 3 / 2 0 0 8 <b>Transaction ID:</b> H4.86769	
Santa Ana	CA	92711		
Purpose of Disbursement: Door Lock			Category/ Type	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.60		14.40		20.00

<b>C. Full Name (Last, First, Middle Initial)</b> Hobby Lobby			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 3695 Commercial Dr.			Allocated Activity or Event Year-To-Date 202975.34	
City	State	Zip Code	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 0 5 / 2 3 / 2 0 0 8 <b>Transaction ID:</b> H4.86771	
Indianapolis	IN	46222		
Purpose of Disbursement: Office Supplies			Category/ Type	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.49		19.25		26.74

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

<b>A. Full Name (Last, First, Middle Initial)</b> Eastern Engineering Supply			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 9901 Allisonville Rd			Allocated Activity or Event Year-To-Date 202975.34	
City Fishers	State IN	Zip Code 46038	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 0 5 / 2 3 / 2 0 0 8 <b>Transaction ID:</b> H4.86772	
Purpose of Disbursement: Paper Supplies				
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.47		65.48		90.95

<b>B. Full Name (Last, First, Middle Initial)</b> Bardach Awards			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 910 Broad Ripple Ave.			Allocated Activity or Event Year-To-Date 202975.34	
City Indianapolis	State IN	Zip Code 46220	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 0 5 / 2 3 / 2 0 0 8 <b>Transaction ID:</b> H4.86774	
Purpose of Disbursement: Staff Name Badges				
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.93		35.83		49.76

<b>C. Full Name (Last, First, Middle Initial)</b> Citation Collection Services			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 68963			Allocated Activity or Event Year-To-Date 202975.34	
City Indianapolis	State IN	Zip Code 46268	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 0 5 / 2 3 / 2 0 0 8 <b>Transaction ID:</b> H4.86775	
Purpose of Disbursement: Parking Tickets				
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
56.00		144.00		200.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

**A. Full Name (Last, First, Middle Initial)**  
Neopost  
**Mailing Address**  
30955 Huntwood Ave  
**City State Zip Code**  
Hayward CA 94544  
**Purpose of Disbursement:**  
New Postage Chip for Postage Meter  
**Activity or Event Identifier:**  
Administrative  
**[MEMO ITEM]**

**Type of Allocated Activity:**  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
**Allocated Activity or Event Year-To-Date**  
202975.34  
**Date** 05 / 23 / 2008  
**Transaction ID:** H4.86777

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
80.89		208.01		288.90

**B. Full Name (Last, First, Middle Initial)**  
Half Moon Restaurant  
**Mailing Address**  
4051 S Lafountain St.  
**City State Zip Code**  
Kokomo IN 46902  
**Purpose of Disbursement:**  
Meals Expense  
**Activity or Event Identifier:**  
Administrative  
**[MEMO ITEM]**

**Type of Allocated Activity:**  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
**Allocated Activity or Event Year-To-Date**  
202975.34  
**Date** 05 / 23 / 2008  
**Transaction ID:** H4.86778

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.49		39.82		55.31

**C. Full Name (Last, First, Middle Initial)**  
Eddie Merlot's  
**Mailing Address**  
3645 E 96th Street  
**City State Zip Code**  
Indianapolis IN 46250  
**Purpose of Disbursement:**  
Meals Expense  
**Activity or Event Identifier:**  
Administrative  
**[MEMO ITEM]**

**Type of Allocated Activity:**  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
**Allocated Activity or Event Year-To-Date**  
202975.34  
**Date** 05 / 23 / 2008  
**Transaction ID:** H4.86780

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.44		34.56		48.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

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

Mailing Address  
3606 Keystone

City	State	Zip Code	Category/ Type
Indianapolis	IN	46237	

Purpose of Disbursement:  
Gas Expense

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
202975.34

Date  /  /   
**Transaction ID:** H4.86782

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.54		29.67		41.21

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

Mailing Address  
8202 Allisonville Road

City	State	Zip Code	Category/ Type
Indianapolis	IN	46250	

Purpose of Disbursement:  
Gas Expense

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
202975.34

Date  /  /   
**Transaction ID:** H4.86783

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.94		40.99		56.93

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

Mailing Address  
530 William Penn Place

City	State	Zip Code	Category/ Type
Pittsburgh	IN	15219	

Purpose of Disbursement:  
Meals Expense

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
202975.34

Date  /  /   
**Transaction ID:** H4.86784

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.84		2.16		3.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

<b>A. Full Name (Last, First, Middle Initial)</b> Marathon Ashland			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 9322 W. 30th St.			Allocated Activity or Event Year-To-Date 202975.34	
City Indianapolis	State IN	Zip Code 46234	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 0 5 / 2 3 / 2 0 0 8 <b>Transaction ID:</b> H4.86785	
Purpose of Disbursement: Gas Expense				
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.84		20.16		28.00

<b>B. Full Name (Last, First, Middle Initial)</b> Expedia, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 13810 SE Eastgate Way			Allocated Activity or Event Year-To-Date 202975.34	
City Bellevue	State WA	Zip Code 98005	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 0 5 / 2 3 / 2 0 0 8 <b>Transaction ID:</b> H4.86786	
Purpose of Disbursement: Travel Fees				
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.96		5.04		7.00

<b>C. Full Name (Last, First, Middle Initial)</b> Northwest Airlines			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 3490 Piedmont Rd			Allocated Activity or Event Year-To-Date 202975.34	
City Atlanta	State GA	Zip Code 30305	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 0 5 / 2 3 / 2 0 0 8 <b>Transaction ID:</b> H4.86787	
Purpose of Disbursement: Airfare				
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
73.50		189.00		262.50

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



# SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Shell Oil

Mailing Address  
7602 N. Shadeland Ave.

City State Zip Code  
Indianapolis IN 46250

Purpose of Disbursement:  
Gas Expense

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
202975.34

Date 05 / 23 / 2008

Transaction ID: H4.86788

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.44		34.56		48.00

**B.** Full Name (Last, First, Middle Initial)  
Cafe Patachou at River Crossings

Mailing Address  
8691 River Crossings Blvd.

City State Zip Code  
Indianapolis IN 46240

Purpose of Disbursement:  
Meals Expense

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
202975.34

Date 05 / 23 / 2008

Transaction ID: H4.86789

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.33		26.57		36.90

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

Mailing Address  
248 E State Rd. 64

City State Zip Code  
Marengo IN 47140

Purpose of Disbursement:  
Gas Expense

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
202975.34

Date 05 / 23 / 2008

Transaction ID: H4.86790

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33.39		85.87		119.26

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

<b>A. Full Name (Last, First, Middle Initial)</b> Oceanaire			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 30 S. Meridian St.			Allocated Activity or Event Year-To-Date 202975.34	
City Indianapolis	State IN	Zip Code 46204	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 0 5 / 2 3 / 2 0 0 8 <b>Transaction ID:</b> H4.86791	
Purpose of Disbursement: Meals Expense				
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.80		43.20		60.00

<b>B. Full Name (Last, First, Middle Initial)</b> Freedom Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 425 Argonne Rd			Allocated Activity or Event Year-To-Date 202975.34	
City Warsaw	State IN	Zip Code 46580	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 0 5 / 2 3 / 2 0 0 8 <b>Transaction ID:</b> H4.86792	
Purpose of Disbursement: Gas Expense				
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.54		42.53		59.07

<b>C. Full Name (Last, First, Middle Initial)</b> Pino S II Sonetto			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 4200 S 7th Street			Allocated Activity or Event Year-To-Date 202975.34	
City Terre Haute	State IN	Zip Code 47802	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 0 5 / 2 3 / 2 0 0 8 <b>Transaction ID:</b> H4.86794	
Purpose of Disbursement: Meals Expense				
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
43.13		110.91		154.04

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

<b>A. Full Name (Last, First, Middle Initial)</b> Lifeline Data Centers, LLC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 600 South Kentucky Ave.			Allocated Activity or Event Year-To-Date 203150.34		
City Indianapolis	State IN	Zip Code 46225	Date <input type="text" value="05"/> / <input type="text" value="23"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Internet Expense			Transaction ID: H4.88160		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
49.00		126.00		175.00

<b>B. Full Name (Last, First, Middle Initial)</b> AT&T Indiana			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 240 N. Meridian St., Rm. 1802			Allocated Activity or Event Year-To-Date 203941.27		
City Indianapolis	State IN	Zip Code 46204	Date <input type="text" value="05"/> / <input type="text" value="23"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Monthly Phone Expense			Transaction ID: H4.88161		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
221.46		569.47		790.93

<b>C. Full Name (Last, First, Middle Initial)</b> AT&T Indiana			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 240 N. Meridian St., Rm. 1802			Allocated Activity or Event Year-To-Date 203977.57		
City Indianapolis	State IN	Zip Code 46204	Date <input type="text" value="05"/> / <input type="text" value="23"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Security System Phone Line			Transaction ID: H4.88162		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.16		26.14		36.30

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
280.62		721.61		1002.23

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

**A. Full Name (Last, First, Middle Initial)**  
ADT Security Services  
**Mailing Address**  
12166 N. Meridian St.  
**City** Carmel **State** IN **Zip Code** 46032  
**Purpose of Disbursement:**  
Security System Expense  
**Activity or Event Identifier:**  
Administrative

**Type of Allocated Activity:**  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
**Allocated Activity or Event Year-To-Date**  
204216.60  
**Date** 05 / 23 / 2008  
**Transaction ID:** H4.88165

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
66.93		172.10		239.03

**B. Full Name (Last, First, Middle Initial)**  
United Parcel Service - Texas  
**Mailing Address**  
PO Box 650580  
**City** Dallas **State** TX **Zip Code** 75265  
**Purpose of Disbursement:**  
Shipping Expense  
**Activity or Event Identifier:**  
Administrative

**Type of Allocated Activity:**  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
**Allocated Activity or Event Year-To-Date**  
204261.48  
**Date** 05 / 23 / 2008  
**Transaction ID:** H4.88166

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.57		32.31		44.88

**C. Full Name (Last, First, Middle Initial)**  
McNamara Florist  
**Mailing Address**  
1100 E. 116th St.  
**City** Carmel **State** IN **Zip Code** 46032  
**Purpose of Disbursement:**  
Flower Expense  
**Activity or Event Identifier:**  
Administrative

**Type of Allocated Activity:**  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
**Allocated Activity or Event Year-To-Date**  
204424.60  
**Date** 05 / 23 / 2008  
**Transaction ID:** H4.88169

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
45.67		117.45		163.12

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
125.17		321.86		447.03

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

<b>A. Full Name (Last, First, Middle Initial)</b> TelSpan, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 101 West Washington Street, Suite			Allocated Activity or Event Year-To-Date 204757.17		
City	State	Zip Code	Category/Type		
Indianapolis	IN	46204			
Purpose of Disbursement: Conference Call Expense					
Activity or Event Identifier: Administrative			Date <input type="text" value="05"/> / <input type="text" value="23"/> / <input type="text" value="2008"/> <b>Transaction ID:</b> H4.88170		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
93.12		239.45		332.57

<b>B. Full Name (Last, First, Middle Initial)</b> Bright House Network			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 741855			Allocated Activity or Event Year-To-Date 205040.29		
City	State	Zip Code	Category/Type		
Cincinnati	OH	45274			
Purpose of Disbursement: Cable Expense					
Activity or Event Identifier: Administrative			Date <input type="text" value="05"/> / <input type="text" value="23"/> / <input type="text" value="2008"/> <b>Transaction ID:</b> H4.88173		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
79.27		203.85		283.12

<b>C. Full Name (Last, First, Middle Initial)</b> Chase Card Services			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 94014			Allocated Activity or Event Year-To-Date 206744.07		
City	State	Zip Code	Category/Type		
Palatine	IL	60094			
Purpose of Disbursement: Credit Card: See Above					
Activity or Event Identifier: Administrative			Date <input type="text" value="05"/> / <input type="text" value="23"/> / <input type="text" value="2008"/> <b>Transaction ID:</b> H4.88174		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
477.06		1226.72		1703.78

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
649.45		1670.02		2319.47

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

<b>A. Full Name (Last, First, Middle Initial)</b> Time Warner Telecom			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 7143			Allocated Activity or Event Year-To-Date 206933.34		
City Lancaster	State PA	Zip Code 17604	Date <input type="text" value="05"/> / <input type="text" value="23"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Internet Data Lines			Transaction ID: H4.88177		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
53.00		136.27		189.27

<b>B. Full Name (Last, First, Middle Initial)</b> Republic Waste Services, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 832 Lansdale Avenue			Allocated Activity or Event Year-To-Date 206955.41		
City Indianapolis	State IN	Zip Code 46202	Date <input type="text" value="05"/> / <input type="text" value="23"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Recycling Expense			Transaction ID: H4.88187		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.18		15.89		22.07

<b>C. Full Name (Last, First, Middle Initial)</b> Wooley's Restaurant			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 175 10th Street			Allocated Activity or Event Year-To-Date 206955.41		
City St. Paul	State MN	Zip Code 55101	Date <input type="text" value="05"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Meals Expense-Paid by M. McDaniel			Transaction ID: H4.86818		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.15		13.25		18.40

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
59.18		152.16		211.34

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

<b>A. Full Name (Last, First, Middle Initial)</b> Sky Water			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1001 Marquette Ave.			Allocated Activity or Event Year-To-Date 206955.41		
City Minneapolis	State MN	Zip Code 55403	Date <input type="text" value="05"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Meals Expense-Paid by M. McDaniel			Transaction ID: H4.86820		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="6.19"/>		<input type="text" value="15.93"/>		<input type="text" value="22.12"/>

<b>B. Full Name (Last, First, Middle Initial)</b> Hertz - Minneapolis			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3800 E 70th Street			Allocated Activity or Event Year-To-Date 206955.41		
City Minneapolis	State MN	Zip Code 55450	Date <input type="text" value="05"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Car Rental - Paid by M. McDaniel			Transaction ID: H4.86822		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="144.21"/>		<input type="text" value="370.82"/>		<input type="text" value="515.03"/>

<b>C. Full Name (Last, First, Middle Initial)</b> Hotel Ivy			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 201 S. Eleventh Street			Allocated Activity or Event Year-To-Date 206955.41		
City Minneapolis	State MN	Zip Code 55403	Date <input type="text" value="05"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Lodging Expense-Paid by M. McDaniel			Transaction ID: H4.86824		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="205.30"/>		<input type="text" value="527.92"/>		<input type="text" value="733.22"/>

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

<b>A. Full Name (Last, First, Middle Initial)</b> Speedway Gas Station			<b>Type of Allocated Activity:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 8202 Allisonville Road			Allocated Activity or Event Year-To-Date 206955.41	
City Indianapolis	State IN	Zip Code 46250	Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> 05 / 30 / 2008 <b>Transaction ID:</b> H4.86826	
Purpose of Disbursement: Gas Expense - Paid by T. Hagerty				
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.80		7.20		10.00

<b>B. Full Name (Last, First, Middle Initial)</b> Trent Hagerty			<b>Type of Allocated Activity:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1923 Jasmine Dr			Allocated Activity or Event Year-To-Date 206965.41	
City Indianapolis	State IN	Zip Code 46219	Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> 05 / 30 / 2008 <b>Transaction ID:</b> H4.88151	
Purpose of Disbursement: Gas Reimbursement				
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.80		7.20		10.00

<b>C. Full Name (Last, First, Middle Initial)</b> Michael D. McDaniel			<b>Type of Allocated Activity:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 7421 Sunset Ln.			Allocated Activity or Event Year-To-Date 208254.18	
City Indianapolis	State IN	Zip Code 46260	Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> 05 / 30 / 2008 <b>Transaction ID:</b> H4.88158	
Purpose of Disbursement: Meals, Lodging, Car Rental Reimbursement				
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
360.86		927.91		1288.77

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
363.66		935.11		1298.77

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Indiana Republican State Committee, Inc.

**A.** Full Name (Last, First, Middle Initial)  
First American Payment Systems

Mailing Address  
201 Main Street, Suite 1000

City	State	Zip Code
Forth Worth	TX	76102

Purpose of Disbursement:  
Credit Card Processing Fees

Category/  
Type

Type of Allocated Activity:

- Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

208499.70

Activity or Event Identifier:  
Administrative

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	8

Transaction ID: H4.88147

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
68.75		176.77		245.52

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
68.75		176.77		245.52

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
10653.93	27395.71	38049.64

Form/Schedule: SA11AI

Transaction ID: SA11AI.87488

On 5/21/08 we received a contribution from Trevor Gray in the amount of \$50,000, which was deposited into our federal account. Ten thousand was reattributed to his spouse Edna Gray and thirty thousand was transferred to our non-federal account, which can accept unlimited contributions from individuals, on 5/21/08. A letter was sent to Mr. & Mrs. Gray advising them of how their contribution was split into our accounts and offer them a chance for a refund. According to AO 2001-17, the Commission has deemed it sufficient to deposit checks that exceed the donor's federal limits into our federal account and then to make a transfer to the non-federal account for the portion that exceeds the federal limit.

Form/Schedule: SA11AI

Transaction ID: SA11AI.87398

On 5/14/08 we received a contribution from David Hannum in the amount of \$15,000, which was deposited into our federal account. Five thousand dollars was transferred to our non-federal account, which can accept unlimited contributions from individuals, on 5/14/08. A letter was sent to David Hannum advising him of how his contribution was split into our accounts and to offer him a chance for a refund. According to AO 2001-17, the Commission has deemed it sufficient to deposit checks that exceed the donor's federal limits into our federal account and then to make a transfer to the non-federal account for the portion that exceeds the federal limit.

Image# 28991269688

Form/Schedule: SA11C

Transaction ID: SA11C.87529

On 5/21/08 we received a contribution from the HNTB Holdings PAC in the amount of \$10,000, which was deposited into our federal account. Five thousand dollars was transferred to our non-federal account, which can accept unlimited contributions from PAC's, on 5/21/08. A letter was sent to the HNTB Holdings PAC advising them of how their contribution was split into our accounts and offer them a chance for a refund. According to AO 2001-17, the Commission has deemed it sufficient to deposit checks that exceed the donor's federal limits into our federal account and then to make a transfer to the non-federal account for the portion that exceeds the federal limit.

Form/Schedule: SD10

Transaction ID: SD10.86697

This debt was paid on 5/2/08 however because the transactions on Schedule 24 are linked to a 48 hour report I am unable to delete them and put them towards this debt. Therefore, this debt is paid in full on Schedule 24.

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