

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

1. NAME OF COMMITTEE (in full)

Hoosiers Supporting Buyer For Congress

ADDRESS (number and street) Check if different than previously reported.
204A North Main St., P.O. Box 712

CITY, STATE and ZIP CODE: **Monticello, IN 47960** STATE/DISTRICT: **IN 5**

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

2. FEC IDENTIFICATION NUMBER
COO255471 **JUL 13 11 45 AM '98**

3. IS THIS REPORT AN AMENDMENT?
 YES NO

4. TYPE OF REPORT

- April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid-Year Report (Non-election Year Only)
- Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____
- Thirtieth day report following the General Election on _____ in the State of _____
- Termination Report

This report contains activity for: Primary Election General Election Special Election Runoff Election

SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-date
<u>04/15/98</u> through <u>06/30/98</u>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	\$54961.09	\$75592.09
(b) Total Contribution Refunds (From Line 20(d))	\$0.00	\$0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	\$54961.09	\$75592.09
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	\$19678.20	\$45902.11
(b) Total Offsets to Operating Expenditures (from Line 14)	\$0.00	\$0.00
(c) Net Operating Expenditures (Subtract Line 7(b) from 7(a))	\$19678.20	\$45902.11
8. Cash on Hand at Close of Reporting Period (from Line 27)	\$214194.25	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$4396.68	

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

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

Type or Print Name of Treasurer
Douglas E. Raderstorf

Signature of Treasurer: *Douglas E. Raderstorf* Date: **7/15/98**

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

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

Name of Committee (in full) Hoosiers Supporting Buyer For Congress	Report Covering the Period: From: 04/16/98 To: 06/30/98	
I. RECEIPTS	Column A Total This Period	Column B Calendar Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (Use Schedule A)	\$16125.04	
(ii) Unitemized	\$5706.42	
(iii) Total of contributions from individual	\$21830.46	\$41337.46
(b) Political Party Committees	\$728.15	\$728.15
(c) Other Political Committees (such as PACs)	\$32402.48	\$33402.48
(d) The Candidate	\$0.00	\$124.00
(e) TOTAL CONTRIBUTIONS (other than loans)(add 11(a)(iii), (b), (c) and (d))	\$54961.09	\$75592.09
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	\$0.00	\$0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate	\$0.00	\$0.00
(b) All Other Loans	\$0.00	\$0.00
(c) TOTAL LOANS (add 13(a) and (b))	\$0.00	\$0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	\$0.00	\$0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	\$662.22	\$1672.41
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	\$55623.31	\$77264.60
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES	\$19678.20	\$45902.11
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	\$0.00	\$0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate	\$0.00	\$0.00
(b) Of All Other Loans	\$0.00	\$0.00
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))	\$0.00	\$0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	\$0.00	\$0.00
(b) Political Party Committees	\$0.00	\$0.00
(c) Other Political Committees (such as PACs)	\$0.00	\$0.00
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	\$0.00	\$0.00
21. OTHER DISBURSEMENTS	\$0.00	\$0.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	\$19678.20	\$45902.11
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD		\$178249.14
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)		\$55623.31
25. SUBTOTAL (add Line 23 and Line 24)		\$233872.45
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)		\$19678.20
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)		\$214194.25

SCHEDULE A

ITEMIZED RECEIPTS

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 electoral purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name, Mailing Address and Zip Code John Barnes 4911 Canterbury Lane P.O. Box 23 Logansport, IN 46947 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Materials Processing, Inc. Occupation owner Date (month, day, year) 05/08/98 Amount of Each Receipt this Period \$500.00 Aggregate Year-to-Date -> \$500.00
Full Name, Mailing Address and Zip Code C. Harvey Bradley 1310 S. State Road 421 Zionsville, IN 46077- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Attorney Date (month, day, year) 06/26/98 Amount of Each Receipt this Period \$60.42 Aggregate Year-to-Date -> \$60.42 IN-KIND
Full Name, Mailing Address and Zip Code C. Harvey Bradley 1310 S. State Road 421 Zionsville, IN 46077- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Attorney Date (month, day, year) 06/26/98 Amount of Each Receipt this Period \$150.00 Aggregate Year-to-Date -> \$210.42
Full Name, Mailing Address and Zip Code Dr. W. Kelley Carr 6 Hitching Post Rd. West Lafayette, IN 47906 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation retired Date (month, day, year) 05/04/98 Amount of Each Receipt this Period \$250.00 Aggregate Year-to-Date -> \$250.00
Full Name, Mailing Address and Zip Code Dr. Gary Coburn 1916 Windermere Dr. Greencastle, IN 46135- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation doctor Date (month, day, year) 05/18/98 Amount of Each Receipt this Period \$250.00 Aggregate Year-to-Date -> \$250.00
Full Name, Mailing Address and Zip Code Al Crebo 8254 W., 600 N. Sharpsville, IN 46068 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Central Indiana Eye Institute Occupation Physician/flying eagle aviatio Date (month, day, year) 05/04/98 Amount of Each Receipt this Period \$250.00 Aggregate Year-to-Date -> \$250.00
Full Name, Mailing Address and Zip Code Jim Davis 2337 N. Untaluti Dr. Monticello, IN 47960 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Indiana Beach, Inc. Occupation Park Executive Date (month, day, year) 05/04/98 Amount of Each Receipt this Period \$250.00 Aggregate Year-to-Date -> \$250.00

SUBTOTAL of Receipts This Page (optional)	\$1710.42
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the detailed Summary page

PAGE 2 OF 9

FOR LINE NUMBER 11(a)(1)

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

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ken Davis P.O. Box 767 241 Park Ave. Francesville, IN 47946-	Houston-Davis Inc. Occupation self	05/05/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$450.00
Betsy Demaree P.O. Box 756 Kokomo, IN 46903-0756	Not Employed Occupation housewife	06/26/98 Food for fundraiser	\$60.42
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$60.42 IN-KIND
Betsy Demaree P.O. Box 756 Kokomo, IN 46903-0756	Not Employed Occupation housewife	06/26/98	\$150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$210.42
James Ervin 410 First St., SE Suite 300 Washington, DC 20003-	ETA Occupation President	06/22/98	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$250.00
John Ewart 1512 Overlook Drive Marion, IN 46952-	Agricor Occupation President	05/21/98	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$250.00
Richard Ford P.O. Box 454 Wabash, IN 46992	Occupation retired	06/26/98	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$350.00
Dr. James Guthrie 271/2 W. 6th Street Peru, IN 46970	Self-Employed Occupation retired-physician	06/26/98 Food for fundraiser	\$60.42
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$60.42 IN-KIND

SUBTOTAL of Receipts This Page (optional)	\$1120.84
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

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

Full Name, Mailing Address and Zip Code Dr. James Guthrie 271/2 W. 6th Street Peru, IN 46970 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation retired-physician Date (month, day, year) 06/26/98 Amount of Each Receipt this Period \$150.00 Aggregate Year-to-Date -> \$210.42
Full Name, Mailing Address and Zip Code The Hon. Bud Hillis 176 South Shore Drive Culver, IN 46511- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Not Employed Occupation retired Date (month, day, year) 06/26/98 Amount of Each Receipt this Period \$200.00 Aggregate Year-to-Date -> \$200.00
Full Name, Mailing Address and Zip Code The Hon. Bud Hillis 176 South Shore Drive Culver, IN 46511- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Not Employed Occupation retired Date (month, day, year) 06/26/98 Amount of Each Receipt this Period \$60.42 Food for fundraiser Aggregate Year-to-Date -> \$260.42 IN-KIND
Full Name, Mailing Address and Zip Code Joseph Huffman 519 Burlington Ave. Logansport, IN 46947 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Not Employed Occupation retired Date (month, day, year) 04/20/98 Amount of Each Receipt this Period \$50.00 Aggregate Year-to-Date -> \$50.00
Full Name, Mailing Address and Zip Code Joseph Huffman 519 Burlington Ave. Logansport, IN 46947 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Not Employed Occupation retired Date (month, day, year) 05/08/98 Amount of Each Receipt this Period \$250.00 Aggregate Year-to-Date -> \$300.00
Full Name, Mailing Address and Zip Code David Krumwiede 710 Whitebark Ct. Naperville, IL 60540- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer E.K. Industries Occupation CEO Date (month, day, year) 05/05/98 Amount of Each Receipt this Period \$250.00 Aggregate Year-to-Date -> \$250.00
Full Name, Mailing Address and Zip Code William Lambert 141 Orchard Lane Kokomo, IN 46901 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Star Building Supply Occupation owner Date (month, day, year) 06/26/98 Amount of Each Receipt this Period \$150.00 Aggregate Year-to-Date -> \$150.00

SUBTOTAL of Receipts This Page (optional)	\$1110.42
TOTAL This Period (last page this line number only)	

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Full Name, Mailing Address and Zip Code William Lambert 141 Orchard Lane Kokomo, IN 46901 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Star Building Supply Occupation owner Date (month, day, year) 06/26/98 Amount of Each Receipt this Period \$60.42 Food for fundraiser Aggregate Year-to-Date -> \$210.42 IN-KIND
Full Name, Mailing Address and Zip Code John Marburger 159 West Main Street Peru, IN 46970 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Marburger Foods Occupation Vice-President Date (month, day, year) 04/20/98 Amount of Each Receipt this Period \$1000.00 Aggregate Year-to-Date -> \$1000.00
Full Name, Mailing Address and Zip Code Glen Marshall P.O. Box 242 2355 Harrison Blvd. Valparaiso, IN 46384- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer self Occupation Excavator Date (month, day, year) 06/23/98 Amount of Each Receipt this Period \$300.00 Aggregate Year-to-Date -> \$300.00
Full Name, Mailing Address and Zip Code James Marshall 2355 Harrison Blvd. Valparaiso, IN 46383- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer self Occupation Excavator Date (month, day, year) 06/26/98 Amount of Each Receipt this Period \$300.00 Aggregate Year-to-Date -> \$300.00
Full Name, Mailing Address and Zip Code Jim Meck 218 Conradt Ave. Kokomo, IN 46901 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer self Occupation retired Date (month, day, year) 05/04/98 Amount of Each Receipt this Period \$50.00 Aggregate Year-to-Date -> \$50.00
Full Name, Mailing Address and Zip Code Jim Meck 218 Conradt Ave. Kokomo, IN 46901 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer self Occupation retired Date (month, day, year) 06/26/98 Amount of Each Receipt this Period \$250.00 Aggregate Year-to-Date -> \$250.00
Full Name, Mailing Address and Zip Code Jim Meck 218 Conradt Ave. Kokomo, IN 46901 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer self Occupation retired Date (month, day, year) 06/26/98 Amount of Each Receipt this Period \$60.42 Food for fundraiser Aggregate Year-to-Date -> \$260.42 IN-KIND

SUBTOTAL of Receipts This Page (optional)	\$1920.84
TOTAL This Period (last page this line number only)	

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Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mike Miles 1121 Highland Dr. Kokomo, IN 46902	Miles, & Finch Insurance	04/28/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation owner		
	Aggregate Year-to-Date ->	\$500.00	
George Miller 10967 W. S.R. 14 Medaryville, IN 47957	Self-Employed	05/08/98	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Farmer		
	Aggregate Year-to-Date ->	\$250.00	
Jane Miller 12275 N. Ogden Pt. Rd. Condo 112 Syracuse, IN 46567-	Not Employed	05/04/98	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation housewife		
	Aggregate Year-to-Date ->	\$1000.00	
Tim Miller 1100 Highland Dr. Kokomo, IN 46902-	Robert Miller & Son Furn.	04/28/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation owner		
	Aggregate Year-to-Date ->	\$500.00	
Daniel Mohr 3146 Villas Dr. S. Kokomo, IN 46901-	Mohr Construction	05/04/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Supervisor		
	Aggregate Year-to-Date ->	\$250.00	
Robert Moorhead 217 S. Belmont Ave. - Ste. F Indianapolis, IN 46222-	Graphics LTD	05/08/98	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Chief Exec Officer		
	Aggregate Year-to-Date ->	\$250.00	
James Moss 950 East Shore Drive Culver, IN 46511-	Not Employed	06/26/98	\$60.42
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation retired	Food for fundraiser	
	Aggregate Year-to-Date ->	\$60.42	IN-KIND

SUBTOTAL of Receipts This Page (optional)	\$2810.42
TOTAL This Period (last page this line number only)	

SCHEDULE A

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

Full Name, Mailing Address and Zip Code James Moss 950 East Shore Drive Culver, IN 46511- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Not Employed Occupation retired Date (month, day, year) 06/26/98 Amount of Each Receipt this Period \$150.00 Aggregate Year-to-Date -> \$210.42
Full Name, Mailing Address and Zip Code John Oliver, Sr. P.O. Box 224 1433 Western Avenue Plymouth, IN 46563 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer U.S. Granuales Occupation President Date (month, day, year) 05/04/98 Amount of Each Receipt this Period \$1000.00 Aggregate Year-to-Date -> \$1000.00
Full Name, Mailing Address and Zip Code John Oliver, Sr. P.O. Box 224 1433 Western Avenue Plymouth, IN 46563 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer U.S. Granuales Occupation President Date (month, day, year) 05/06/98 Amount of Each Receipt this Period \$1000.00 Aggregate Year-to-Date -> \$2000.00
Full Name, Mailing Address and Zip Code Dilip Patel P.O. Box 446 Marion, IN 46952- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Thomson Consumer Electronics Occupation Manager Date (month, day, year) 05/21/98 Amount of Each Receipt this Period \$150.00 Aggregate Year-to-Date -> \$300.00
Full Name, Mailing Address and Zip Code Jeffrey Price 172 West Sixth Street Peru, IN 46970 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Attorney Date (month, day, year) 05/04/98 Amount of Each Receipt this Period \$250.00 Aggregate Year-to-Date -> \$250.00
Full Name, Mailing Address and Zip Code Dick Sauerman 1155 E. Joliet St. Crown Point, IN 46307- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer HFS Bank Occupation V.P. Commercial Banking Date (month, day, year) 05/08/98 Amount of Each Receipt this Period \$250.00 Aggregate Year-to-Date -> \$250.00
Full Name, Mailing Address and Zip Code Thomas Schilli 1560 Kepner Dr. Lafayette, IN 47905- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Schilli Transportation Occupation President Date (month, day, year) 05/18/98 Amount of Each Receipt this Period \$250.00 Aggregate Year-to-Date -> \$250.00

SUBTOTAL of Receipts This Page (optional)	\$3050.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in full)
Hoosiers Supporting Buyer For Congress

Full Name, Mailing Address and Zip Code E.P. Severns, Jr. 507 Sagebrush Drive Kokomo, IN 46901-	Name of Employer Coca-Cola Bottling, Company Occupation President	Date (month, day, year) 05/04/98	Amount of Each Receipt this Period \$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$500.00		
Full Name, Mailing Address and Zip Code E.P. Severns, Jr. 507 Sagebrush Drive Kokomo, IN 46901-	Name of Employer Coca-Cola Bottling, Company Occupation President	Date (month, day, year) 06/26/98	Amount of Each Receipt this Period \$60.42
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$560.42 IN-KIND		
Full Name, Mailing Address and Zip Code E.P. Severns, Jr. 507 Sagebrush Drive Kokomo, IN 46901-	Name of Employer Coca-Cola Bottling, Company Occupation President	Date (month, day, year) 06/26/98	Amount of Each Receipt this Period \$150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$710.42		
Full Name, Mailing Address and Zip Code Tom Spackman 5224 Indiana Beach Dr. Monticello, IN 47960-	Name of Employer Indiana Beach, Inc. Occupation President	Date (month, day, year) 04/22/98	Amount of Each Receipt this Period \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$500.00		
Full Name, Mailing Address and Zip Code Stephen Spaugn 11572 Fall Creek Rd. Indianapolis, IN 46256-	Name of Employer Spaugn and Company Occupation Nursing Home Operator	Date (month, day, year) 05/10/98	Amount of Each Receipt this Period \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$250.00		
Full Name, Mailing Address and Zip Code Keith Stearns P.O. Box 1081 Kokomo, IN 46903-1081	Name of Employer Stearns Moving & Storage Inc. Occupation owner	Date (month, day, year) 04/28/98	Amount of Each Receipt this Period \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$500.00		
Full Name, Mailing Address and Zip Code Dr. Bob Steele 620 S. Berkley Kokomo, IN 46901	Name of Employer St. Vincent Health Care Occupation doctor	Date (month, day, year) 06/26/98	Amount of Each Receipt this Period \$60.42
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$60.42 IN-KIND		

SUBTOTAL of Receipts This Page (optional) \$1770.64

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

Full Name, Mailing Address and Zip Code Dr. Bob Steele 620 S. Berkley Kokomo, IN 46901 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer St. Vincent Health Care Occupation doctor Date (month, day, year) 06/26/98 Aggregate Year-to-Date -> \$310.42	Amount of Each Receipt this Period \$250.00
Full Name, Mailing Address and Zip Code Robert Tanguy 586 South Shore Drive Culver, IN 46511 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Major General, USAP Occupation retired Date (month, day, year) 06/26/98 Aggregate Year-to-Date -> \$150.00	Amount of Each Receipt this Period \$150.00
Full Name, Mailing Address and Zip Code Robert Tanguy 586 South Shore Drive Culver, IN 46511 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Major General, USAF Occupation retired Date (month, day, year) 06/26/98 Aggregate Year-to-Date -> \$210.42	Amount of Each Receipt this Period \$60.42 IN-KIND
Full Name, Mailing Address and Zip Code Peter Trone 932 Academy Road Culver, IN 46511 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Not Employed Occupation retired Date (month, day, year) 06/26/98 Aggregate Year-to-Date -> \$150.00	Amount of Each Receipt this Period \$150.00
Full Name, Mailing Address and Zip Code Peter Trone 932 Academy Road Culver, IN 46511 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Not Employed Occupation retired Date (month, day, year) 06/26/98 Aggregate Year-to-Date -> \$210.42	Amount of Each Receipt this Period \$60.42 IN-KIND
Full Name, Mailing Address and Zip Code Francis Verkamp 5044 Watersite Circle Indianapolis, IN 46254-9616 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Allison Engine Corporation Occupation Engineer Date (month, day, year) 05/18/98 Aggregate Year-to-Date -> \$250.00	Amount of Each Receipt this Period \$250.00
Full Name, Mailing Address and Zip Code J. Smoke Wallin 7975 Hillcrest Rd. Indianapolis, IN 46240- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer National Wine & Spirits Corp. Occupation Business Date (month, day, year) 05/08/98 Aggregate Year-to-Date -> \$250.00	Amount of Each Receipt this Period \$250.00

SUBTOTAL of Receipts This Page (optional)	\$1170.84
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

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

Full Name, Mailing Address and Zip Code Leo Watson 3433 South La Fountain Kokomo, IN 46902-3801 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Eye Physicians, Inc. Occupation Ophthalmologist	Date (month, day, year) 06/26/98	Amount of Each Receipt this Period \$1000.00 Aggregate Year-to-Date -> \$1000.00
Full Name, Mailing Address and Zip Code George Wilkins P.O. Box 837 Edwardsville, IL 62025-0837 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Registered Nurse	Date (month, day, year) 06/26/98	Amount of Each Receipt this Period \$60.42 Aggregate Year-to-Date -> \$60.42 IN-KIND
Full Name, Mailing Address and Zip Code George Wilkins P.O. Box 837 Edwardsville, IL 62025-0837 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Registered Nurse	Date (month, day, year) 06/26/98	Amount of Each Receipt this Period \$150.00 Aggregate Year-to-Date -> \$210.42
Full Name, Mailing Address and Zip Code Rich Walter 3350 W 132nd Ct. Crown Point, IN 46307 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Attorney Occupation	Date (month, day, year) 05/12/98	Amount of Each Receipt this Period \$250.00 Aggregate Year-to-Date -> \$250.00
Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation	Date (month, day, year) / /	Amount of Each Receipt this Period Aggregate Year-to-Date ->
Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation	Date (month, day, year) / /	Amount of Each Receipt this Period Aggregate Year-to-Date ->
Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation	Date (month, day, year) / /	Amount of Each Receipt this Period Aggregate Year-to-Date ->

SUBTOTAL of Receipts This Page (optional)	\$1460.42
TOTAL This Period (last page this line number only)	\$16125.04

SCHEDULE A

ITEMIZED RECEIPTS

Any information required from these 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 for such committee.

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

Full Name, Mailing Address and Zip Code Howard Co. Republican Central Committee P.O. Box 3 Kokomo, IN 46903-0003 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Howard Co. Rep. Central Comm. Occupation No Occupation	Date (month, day, year) 05/08/98 Kokomo gol	Amount of Each Receipt this Period \$228.15 98 Aggregate Year-to-Date -> \$228.15	IN-KIND
Full Name, Mailing Address and Zip Code Howard Co. Republican Central Committee P.O. Box 3 Kokomo, IN 46903-0003 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Howard Co. Rep. Central Comm. Occupation No Occupation	Date (month, day, year) 05/11/98	Amount of Each Receipt this Period \$500.00 Aggregate Year-to-Date -> \$728.15	
Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period	
Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period	
Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period	
Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period	
Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period	

SUBTOTAL of Receipts This Page (optional)	\$728.15
TOTAL This Period (last page this line number only)	\$728.15

SCHEDULE A

ITEMIZED RECEIPTS

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

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

Full Name, Mailing Address and Zip Code Allison Engine Company PAC P.O. Box 420, Speed Code U24A Indianapolis, IN 46206- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Date (month, day, year) 05/18/98 Facility of fundraiser	Amount of Each Receipt this Period \$1902.48 IN-KIND Aggregate Year-to-Date -> \$1902.48
Full Name, Mailing Address and Zip Code American Academy of Ophthalmology - Suite 700 1101 Vermont Ave., NW Washington, DC 20005- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Date (month, day, year) 06/26/98	Amount of Each Receipt this Period \$1000.00 Aggregate Year-to-Date -> \$1000.00
Full Name, Mailing Address and Zip Code American Dental PAC 1111 14th St., NW - Suite 1100 Washington, DC 20005- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Date (month, day, year) 05/18/98	Amount of Each Receipt this Period \$500.00 Aggregate Year-to-Date -> \$500.00
Full Name, Mailing Address and Zip Code American Dental PAC 1111 14th St., NW - Suite 1100 Washington, DC 20005- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Date (month, day, year) 06/26/98	Amount of Each Receipt this Period \$500.00 Aggregate Year-to-Date -> \$1000.00
Full Name, Mailing Address and Zip Code American Health Care Assoc. PAC 1201 "L" St., NW Washington, DC 20005- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Date (month, day, year) 05/18/98	Amount of Each Receipt this Period \$1000.00 Aggregate Year-to-Date -> \$1000.00
Full Name, Mailing Address and Zip Code American Hotel & Motel PAC 1201 New York Ave., NW Suite 600 Washington, DC 20005-1931 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Date (month, day, year) 06/29/98	Amount of Each Receipt this Period \$500.00 Aggregate Year-to-Date -> \$500.00
Full Name, Mailing Address and Zip Code American Institute of CPA's 1455 Pennsylvania Ave., NW Washington, DC 20004- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Date (month, day, year) 04/27/98	Amount of Each Receipt this Period \$1000.00 Aggregate Year-to-Date -> \$1000.00

SUBTOTAL of Receipts This Page (optional)	\$6402.48
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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 area contributors.

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

Full Name, Mailing Address and Zip Code American Medical PAC 1101 Vermont Ave., NW Washington, DC 20005-	Name of Employer Occupation Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 04/17/98	Amount of Each Receipt this Period \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
Full Name, Mailing Address and Zip Code American Optometric Association PAC 1505 Prince St. Suite 300. Alexandria, VA 22314-	Name of Employer Occupation Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 05/18/98	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
Full Name, Mailing Address and Zip Code American Trucking Assoc. 430 1st St., SE Washington, DC 20003-	Name of Employer Occupation Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 06/25/98	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
Full Name, Mailing Address and Zip Code Ameritech PAC 1401 H St., NW P.O. Box 27040 Washington, DC 20038-7743	Name of Employer Occupation Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 05/27/98	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
Full Name, Mailing Address and Zip Code Build PAC 1201 15th St., NW Washington, DC 20005	Name of Employer Occupation Aggregate Year-to-Date -> \$1000.00	Date (month, day, year) 04/28/98	Amount of Each Receipt this Period \$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
Full Name, Mailing Address and Zip Code Chrysler Corporation Political Support Committee 1000 Chrysler Dr. Auburn Hills, MI 48326-	Name of Employer Occupation Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 05/27/98	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
Full Name, Mailing Address and Zip Code Credit Union Legislative Action Council 805 15th St., NW - Suite 300 Washington, DC 20005-2207	Name of Employer Occupation Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 05/22/98	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Receipts This Page (optional)	\$4000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

See separate schedules for each category of the Detailed Summary Page.

All information reported here must be true and correct. It may not be used by any person for the purpose of soliciting contributions or for commercial purposes, other than radio, television and address of any political committee to solicit contributions from such sources.

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

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dealers Election Action Committee 8400 Westpark Dr. Mc Lean, VA 22102-		06/17/98	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$500.00	
ENGPAC 1234 6th St., #204 Santa Monica, CA 90401-		06/17/98	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$500.00	
Federal Express PAC 2005 Corporate Ave. Memphis, TN 38132-		06/29/98	\$2500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$2500.00	
GM Civic Involvement Program P.O. Box 9677 3044 W. Grand Blvd. Detroit, MI 48202-		06/12/98	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$500.00	
GTE PAC 1850 M St., NW Suite 1200 Washington, DC 20036-		06/12/98	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$500.00	
General Dynamics PAC 3190 Fairview Park Drive Suite 200 Falls Church, VA 22042-		06/17/98	\$1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$1000.00	
General Electric PAC 1299 Pennsylvania Ave., NW Suite 1100 Washington, DC 20004-		06/26/98	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$500.00	

SUBTOTAL of Receipts This Page (optional)	\$6000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Any information reported from such Receipts and Statements of Contributions shall be used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any donor of contributions to solicit contributions from such Committee.

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

Full Name, Mailing Address and Zip Code Golden Rule Financial Corp 7440 Woodland Dr. Indianapolis, IN 46278-	Name of Employer Occupation Date (month, day, year) 05/18/98	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$500.00	
Full Name, Mailing Address and Zip Code Howard County Home Bldgs., PAC Kokomo, IN 46901-04	Name of Employer Occupation Date (month, day, year) 04/28/98	Amount of Each Receipt this Period \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$500.00	
Full Name, Mailing Address and Zip Code Mortgage Bankers PAC 1125 15th St., NW Suite 700 Washington, DC 20005-	Name of Employer Occupation Date (month, day, year) 05/18/98	Amount of Each Receipt this Period \$1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$1000.00	
Full Name, Mailing Address and Zip Code National Rifle Association 11250 Waples Mill Rd. Fairfax, VA 22030-7400	Name of Employer Occupation Date (month, day, year) 06/26/98	Amount of Each Receipt this Period \$1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$1000.00	
Full Name, Mailing Address and Zip Code National Rifle Association 11250 Waples Mill Rd. Fairfax, VA 22030-7400	Name of Employer Occupation Date (month, day, year) 06/29/98	Amount of Each Receipt this Period \$1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$2000.00	
Full Name, Mailing Address and Zip Code National Rifle Association 11250 Waples Mill Rd. Fairfax, VA 22030-7400	Name of Employer Occupation Date (month, day, year) 06/29/98	Amount of Each Receipt this Period \$1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$3000.00	
Full Name, Mailing Address and Zip Code Norwest Corporation PAC Norwest Center Sixth and Marquette Minneapolis, MN 55479-	Name of Employer Occupation Date (month, day, year) 05/18/98	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$500.00	

SUBTOTAL of Receipts This Page (optional)	\$5500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the detailed Summary Page

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

Full Name, Mailing Address and Zip Code Philip Morris Companies PAC 120 Park Ave. New York, NY 10017-	Name of Employer Occupation Date (month, day, year) 06/29/98	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$500.00	
Full Name, Mailing Address and Zip Code Raytheon, Pac 141 Spring St. Lexington, MA 02173-7899	Name of Employer Occupation Date (month, day, year) 06/26/98	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$500.00	
Full Name, Mailing Address and Zip Code Realtors PAC 430 N. Michigan Ave. Chicago, IL 60611-	Name of Employer Occupation Date (month, day, year) 06/12/98	Amount of Each Receipt this Period \$1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$1000.00	
Full Name, Mailing Address and Zip Code Rogers Group, Inc. PAC 421 Great Circle Rd. Nashville, TN 37228-	Name of Employer Occupation Date (month, day, year) 05/18/98	Amount of Each Receipt this Period \$1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$1000.00	
Full Name, Mailing Address and Zip Code SBC Communications PAC 175 E. Houston Room 4-R-4 San Antonio, TX 78205-	Name of Employer Occupation Date (month, day, year) 06/22/98	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$500.00	
Full Name, Mailing Address and Zip Code The Boeing Company, PAC 1700 N. Moore St., 20th Floor Arlington, VA 22209-	Name of Employer Occupation Date (month, day, year) 06/12/98	Amount of Each Receipt this Period \$1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$1000.00	
Full Name, Mailing Address and Zip Code The Prudential Insurance Co., PAC Newark, NJ 07101-	Name of Employer Occupation Date (month, day, year) 05/18/98	Amount of Each Receipt this Period \$1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$1000.00	

SUBTOTAL of Receipts This Page (optional)

\$5500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

Full Name, Mailing Address and Zip Code UPS PAC 55 Glenlake Parkway, N.E. Terraces North Atlanta, GA 30328-	Name of Employer Occupation Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 06/29/98	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
Full Name, Mailing Address and Zip Code UPS PAC 55 Glenlake Parkway, N.E. Terraces North Atlanta, GA 30328-	Name of Employer Occupation Aggregate Year-to-Date -> \$5000.00	Date (month, day, year) 06/30/98	Amount of Each Receipt this Period \$4500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
Full Name, Mailing Address and Zip Code ,	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
Full Name, Mailing Address and Zip Code ,	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
Full Name, Mailing Address and Zip Code ,	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
Full Name, Mailing Address and Zip Code ,	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
Full Name, Mailing Address and Zip Code ,	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
Full Name, Mailing Address and Zip Code ,	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Receipts This Page (optional)	\$5000.00
TOTAL This Period (last page this line number only)	\$32402.48

SCHEDULE A

ITEMIZED RECEIPTS

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

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

Full Name, Mailing Address and Zip Code Stephen Buyer 204A North Main St. Monticello, IN 47960-	Name of Employer United States Government	Date (month, day, year) 06/08/98	Amount of Each Receipt this Period \$758.67
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Fifth District Congressman	Reimbursement for supplies	
Aggregate Year-to-Date ->		\$882.67	MEMO
Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year) / /	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
Aggregate Year-to-Date ->			
Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year) / /	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
Aggregate Year-to-Date ->			
Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year) / /	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
Aggregate Year-to-Date ->			
Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year) / /	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
Aggregate Year-to-Date ->			
Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year) / /	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
Aggregate Year-to-Date ->			
Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year) / /	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
Aggregate Year-to-Date ->			
Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year) / /	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
Aggregate Year-to-Date ->			

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate Schedules for each category of the Detailed Summary Page

Any information reported from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, without the consent of the name and address of any political committee to receive contributions from such committee.

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

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lafayette Bank & Trust P.O. Box 1130 Lafayette, IN 47902-		05/11/98	\$141.55
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	Aggregate Year-to-Date ->	\$1087.44
Lafayette Bank & Trust P.O. Box 1130 Lafayette, IN 47902-		05/17/98	\$249.40
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	Aggregate Year-to-Date ->	\$1336.84
Lafayette Bank & Trust P.O. Box 1130 Lafayette, IN 47902-		06/11/98	\$156.09
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	Aggregate Year-to-Date ->	\$1492.93
Norwest Bank 119 North Main Street Monticello, IN 47960-6748		04/28/98	\$29.25
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	Aggregate Year-to-Date ->	\$93.55
Norwest Bank 119 North Main Street Monticello, IN 47960-6748		05/28/98	\$40.75
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	Aggregate Year-to-Date ->	\$134.30
Norwest Bank 119 North Main Street Monticello, IN 47960-6748		06/28/98	\$45.18
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	Aggregate Year-to-Date ->	\$179.48
		/ /	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	Aggregate Year-to-Date ->	

SUBTOTAL of Receipts This Page (optional)	\$662.22
TOTAL This Period (last page this line number only)	\$662.22

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Allison Engine Company PAC P.O. Box 420, Speed Code U24A Indianapolis, IN 46206-	Facility of fundraiser Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/18/98	\$1902.48 IN KIND
C. Harvey Bradley 1310 S. State Road 421 Zionsville, IN 46077-	Food for fundraiser Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/26/98	\$60.42 IN KIND
Buschman's Service Center, Inc. 210 W. Broadway Monticello, IN 47960-	gasoline Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/27/98	\$111.91
Buschman's Service Center, Inc. 210 W. Broadway Monticello, IN 47960-	gasoline Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/30/98	\$90.25
Stephen Buyer 204A North Main St. Monticello, IN 47960-	reimb. for supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/08/98	\$758.67
Card Services P.O. Box 10347 Des Moines, IA 50306-	"see below" Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/22/98	\$1855.32
Adventure Travel 514 St. Rd. 20 East Williamsport, IN 47993-	airline tickets Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/22/98	\$155.00 MEMO

SUBTOTAL of Disbursements This Page (optional)	\$4779.05
TOTAL This Period (last page this-line-number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

Any information copied from such reports and statements may not be used by any person for the purpose of soliciting contributions for any commercial purpose, other than during the term and address of any political committee to solicit contributions from such committee.

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

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Adventure Travel 514 St. Rd. 28 East Williamsport, IN 47993-	airline tickets Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/22/98	\$323.00 MEMO
Card Services P.O. Box 10347 Des Moines, IA 50306-	annual fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/22/98	\$40.00 MEMO
Hilton Hotels Jacksonville, FL 32201-	hotel expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/22/98	\$310.81 MEMO
Ponte Vedra Hotel Ponte Vedra Beach, FL 32082-	hotel expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/22/98	\$294.30 MEMO
The Woodlands Hotel 2301 N Millbend Rd. The Woodlands, TX 77380	hotel expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/22/98	\$412.31 MEMO
Betsy Demaree P.O. Box 756 Kokomo, IN 46903-0756	Food for fundraiser Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/26/98	\$60.42 IN KIND
Cong. Bill Goodling 2263 Rayburn HOB Washington, DC 20515-	contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/11/98	\$1000.00

SUBTOTAL of Disbursements This Page (optional):	\$1060.82
TOTAL This Period (last page this line number only):	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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

Full Name, Mailing Address and Zip Code James Guthrie 271/2 W. 6th Street Peru, IN 46970	Purpose of Disbursement Food for fundraiser Disbursement type: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other specify:	Date (month, day, year) 06/26/98	Amount of Each Disbursement This Period \$60.42 IN KIND
Full Name, Mailing Address and Zip Code Heather Wilson for Congress 5400 San Mateo, N.E. Suite G Albuquerque, NM 87109-	Purpose of Disbursement contribution Disbursement type: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other specify:	Date (month, day, year) 06/17/98	Amount of Each Disbursement This Period \$1000.00
Full Name, Mailing Address and Zip Code Bud Hillis 176 South Shore Drive Culver, IN 46511-	Purpose of Disbursement Food for fundraiser Disbursement type: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other specify:	Date (month, day, year) 06/26/98	Amount of Each Disbursement This Period \$60.42 IN KIND
Full Name, Mailing Address and Zip Code Howard Co. Republican Central Committee P.O. Box 3 Kokomo, IN 46903-0003	Purpose of Disbursement Fundraiser Expense Disbursement type: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other specify:	Date (month, day, year) 05/08/98	Amount of Each Disbursement This Period \$228.15 IN KIND
Full Name, Mailing Address and Zip Code Ind. Dept of Revenue 100 N. Senate Ave. Indianapolis, IN 46204-	Purpose of Disbursement payroll taxes Disbursement type: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other specify:	Date (month, day, year) 04/24/98	Amount of Each Disbursement This Period \$96.40
Full Name, Mailing Address and Zip Code William Lambert 141 Orchard Lane Kokomo, IN 46901	Purpose of Disbursement Food for fundraiser Disbursement type: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other specify:	Date (month, day, year) 06/26/98	Amount of Each Disbursement This Period \$60.42 IN KIND
Full Name, Mailing Address and Zip Code Main Street Computers 224 N. Main Street P.O. Box 1003 Monticello, IN 47960-	Purpose of Disbursement office supplies Disbursement type: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other specify:	Date (month, day, year) 06/03/98	Amount of Each Disbursement This Period \$57.35

SUBTOTAL of Disbursements This Page (optional):	\$1563.16
TOTAL This Period (last page this line number only):	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Main Street Computers 224 N. Main Street P.O. Box 1003 Monticello, IN 47960-	ups shipment Disbursement type: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/01/98	\$5.57
Main Street Computers 224 N. Main Street P.O. Box 1003 Monticello, IN 47960-	ups shipment Disbursement type: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/08/98	\$5.79
Main Street Computers 224 N. Main Street P.O. Box 1003 Monticello, IN 47960-	supplies Disbursement type: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/07/98	\$355.91
Main Street Computers 224 N. Main Street P.O. Box 1003 Monticello, IN 47960-	ups shipment Disbursement type: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/29/98	\$6.20
Main Street Computers 224 N. Main Street P.O. Box 1003 Monticello, IN 47960-	ups shipment Disbursement type: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/08/98	\$6.57
Jim Meck 218 Conratt Ave. Kokomo, IN 46901	Food for fundraiser Disbursement type: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/26/98	\$60.42 IN KIND
Mitchells Mills 7916N - 700W Delphi, IN 46923-	payroll Disbursement type: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/29/98	\$564.15

SUBTOTAL of Disbursements This Page (optional)	\$1004.71
TOTAL This Period (last-page-this-line-number-only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the following Summary Page

Any information copied from such Reports and Statements may not be used 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)
Roosiers Supporting Buyer For Congress

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Michelle Mills 7916N - 700W Delphi, IN 46923-	payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/30/98	\$619.48
James Moss 950 East Shore Drive Culver, IN 46511-	Food for fundraiser Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/26/98	\$60.42 IN KIND
Nipaco P.O. Box 13007 Merrillville, IN 46411	electric bill Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/01/98	\$77.99
Nipaco P.O. Box 13007 Merrillville, IN 46411	electric bill Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/04/98	\$96.09
Norwest Bank 119 North Main Street Monticello, IN 47960-6748	ordered checks Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/15/98	\$17.00
Norwest Bank 119 North Main Street Monticello, IN 47960-6748	payroll taxes Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/12/98	\$289.06
Norwest Bank 119 North Main Street Monticello, IN 47960-6748	payroll taxes Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/15/98	\$857.40

SUBTOTAL of Disbursements This Page (optional):	\$2017.44
TOTAL This Period (last page this line number only):	

SCHEDULE B

ITEMIZED DISBURSEMENTS

See separate instructions for each category of the detailed activity page	PAGE	OF
	8	10
FOR LINE NUMBER		
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 to aid the cause and address of any political committee to attract contributions from such sources.

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

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Norwest Bank 119 North Main Street Monticello, IN 47960-6748	payroll taxes Disbursement type: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/24/98	\$309.48
Postmaster 125 W. Broadway Monticello, IN 47960-	postage Disbursement type: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/15/98	\$1.70
Postmaster 125 W. Broadway Monticello, IN 47960-	postage Disbursement type: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/08/98	\$32.00
Postmaster 125 W. Broadway Monticello, IN 47960-	postage Disbursement type: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/22/98	\$32.00
Postmaster 125 W. Broadway Monticello, IN 47960-	postage Disbursement type: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/12/98	\$32.00
Postmaster 125 W. Broadway Monticello, IN 47960-	postage Disbursement type: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/14/98	\$32.25
Postmaster 125 W. Broadway Monticello, IN 47960-	postage Disbursement type: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/22/98	\$33.01

SUBTOTAL of Disbursements This Page (optional)	\$472.44
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the Detailed Budget Page

PAGE 7 OF 10
FOR LINE NUMBER 17

All International reports must be reported and statements must all be filed as used by any person for the purpose of soliciting contributions or for official purposes, other than during the last six months of any political campaign, to which, certify (flow from such sources).

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

Full Name, Mailing Address and Zip Code Postmaster 125 W. Broadway Monticello, IN 47960-	Purpose of Disbursement postage Disbursement type: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other specify:	Date (month, day, year) 06/26/98	Amount of Each Disbursement This Period \$32.00
Full Name, Mailing Address and Zip Code Postmaster 125 W. Broadway Monticello, IN 47960-	Purpose of Disbursement Postage Disbursement type: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other specify:	Date (month, day, year) 04/17/98	Amount of Each Disbursement This Period \$91.00
Full Name, Mailing Address and Zip Code Postmaster 125 W. Broadway Monticello, IN 47960-	Purpose of Disbursement postage Disbursement type: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other specify:	Date (month, day, year) 04/29/98	Amount of Each Disbursement This Period \$195.39
Full Name, Mailing Address and Zip Code G Graphics 108 E. Main St. Delphi, IN 46923-	Purpose of Disbursement Printing Services Disbursement type: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other specify:	Date (month, day, year) 04/23/98	Amount of Each Disbursement This Period \$1147.49
Full Name, Mailing Address and Zip Code Doug Raderstorf 1720 N. Royal Oaks Dr. Monticello, IN 47960	Purpose of Disbursement payroll Disbursement type: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other specify:	Date (month, day, year) 05/29/98	Amount of Each Disbursement This Period \$384.78
Full Name, Mailing Address and Zip Code Doug Raderstorf 1720 N. Royal Oaks Dr. Monticello, IN 47960	Purpose of Disbursement payroll Disbursement type: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other specify:	Date (month, day, year) 04/30/98	Amount of Each Disbursement This Period \$394.78
Full Name, Mailing Address and Zip Code Rensselaer Printco 116 N. Cullen Street Rensselaer, IN 47978-	Purpose of Disbursement printing services Disbursement type: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other specify:	Date (month, day, year) 06/05/98	Amount of Each Disbursement This Period \$361.64

SUBTOTAL of Disbursements This Page (optional)	\$2597.08
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate accounts for 502 and 503 entries of the Detailed Summary Form

Any information copied from such reports and statements may not be used by any person for the purpose of soliciting contributions or for any other purpose, direct or indirect, the name and address of any political committee to solicit contributions from such sources.

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

Full Name, Mailing Address and Zip Code George Rogers 706 Buckingham Dr. Marion, IN 46952-	Purpose of Disbursement reimb. gas Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/08/98	Amount of Each Disbursement This Period \$13.32
Full Name, Mailing Address and Zip Code George Rogers 706 Buckingham Dr. Marion, IN 46952-	Purpose of Disbursement payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/29/98	Amount of Each Disbursement This Period \$747.66
Full Name, Mailing Address and Zip Code George Rogers 706 Buckingham Dr. Marion, IN 46952-	Purpose of Disbursement reimb. gas Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/22/98	Amount of Each Disbursement This Period \$10.00
Full Name, Mailing Address and Zip Code George Rogers 706 Buckingham Dr. Marion, IN 46952-	Purpose of Disbursement payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/15/98	Amount of Each Disbursement This Period \$747.66
Full Name, Mailing Address and Zip Code George Rogers 706 Buckingham Dr. Marion, IN 46952-	Purpose of Disbursement payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/15/98	Amount of Each Disbursement This Period \$875.40
Full Name, Mailing Address and Zip Code E.F. Severns, Jr. 507 Sagebrush Drive Kokomo, IN 46901-	Purpose of Disbursement Food for fundraiser Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/26/98	Amount of Each Disbursement This Period \$60.42 IN KIND
Full Name, Mailing Address and Zip Code Sprint P.O. Box 74517 Atlanta, GA 30374-	Purpose of Disbursement telephone expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/22/98	Amount of Each Disbursement This Period \$175.33

SUBTOTAL of Disbursements This Page (optional)	\$2629.79
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the detailed Summary Page

All information reported from each Report and Statement may not be used or used by any person for the purpose of soliciting contributions or for campaign purposes, other than using the name and address of any political committee to notify contributors from such committee.

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

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Sprint P.O. Box 74517 Atlanta, GA 30374-	telephone expense Disbursement type: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/18/98	\$321.55
Sprint P.O. Box 74517 Atlanta, GA 30374-	telephone expense Disbursement type: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/20/98	\$228.54
Dr. Bob Steele 620 S. Berkley Kokomo, IN 46901	Food for fundraiser Disbursement type: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/26/98	\$60.42 IN KIND
Stunt Dawg Studios 110 N. Front St. Rensselaer, IN 47978-	reprint 100 shirts Disbursement type: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/17/98	\$306.00
Stunt Dawg Studios 110 N. Front St. Rensselaer, IN 47978-	printed t-shirts Disbursement type: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/10/98	\$632.00
Robert Tanguy 586 South Shore Drive Culver, IN 46511	Food for fundraiser Disbursement type: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/26/98	\$60.42 IN KIND
Peter Trone 932 Academy Road Culver, IN 46511	Food for fundraiser Disbursement type: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/26/98	\$60.42 IN KIND

SUBTOTAL of Disbursements This Page (optional)	\$1669.35
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

See separate schedules for each category of the following summary table

PAGE 10 OF 10
FOR LINE NUMBER 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 individual committee to solicit contributions from such committee.

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

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Lawrence Vogel 907 E. US 24 Monticello, IN 47960-	July rent DISBURSEMENT FOR: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/22/98	\$435.00
Lawrence Vogel 907 E. US 24 Monticello, IN 47960-	June rent DISBURSEMENT FOR: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/27/98	\$435.00
Lawrence Vogel 907 E. US 24 Monticello, IN 47960-	May rent DISBURSEMENT FOR: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/27/98	\$435.00
Frances Wilkins P.O. Box 837 Edwardsville, IL 62025-0837	Food for fundraiser DISBURSEMENT FOR: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/26/98	\$60.42 IN KIND
		/ /	
		/ /	
		/ /	

SUBTOTAL of Disbursements This Page (optional)	\$1365.42
TOTAL This Period (last page this line number only)	\$19138.86

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans


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

Name of Committee (In Full) Hoosiers Supporting Buyer For Congress	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Michelle Mills 7916N, 300W Delphi, IN 46923	\$0.00	\$619.48	\$0.00	\$619.48
Nature of Debt (Purpose): Payroll Check				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor George Rogers 706 Buckingham Dr. Marion, IN 46952	\$0.00	\$1315.86	\$0.00	\$1315.86
Nature of Debt (Purpose): Payroll Check & Expenses				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Tournament Players Club Avenel 10000 Oaklyn Drive Potomac, Maryland 20854	\$0.00	\$1582.86	\$0.00	\$1582.86
Nature of Debt (Purpose): Facilities for fundraiser				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Campbell Printing Company 125N Van Rensselaer Street Rensselaer, IN 47978	\$0.00	\$878.48	\$0.00	\$878.48
Nature of Debt (Purpose): Printing Expense				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor (Empty)				
Nature of Debt (Purpose): (Empty)				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor (Empty)				
Nature of Debt (Purpose): (Empty)				
1) SUBTOTALS This Period This Page (optional)				\$4396.68
2) TOTALS This Period (last page in this line only)				\$4396.68
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				\$4396.68

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 7-15-98
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 PREPARER	7-19-98 DATE PREPARED