

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. 12FE4M5
Bucshon for Congress

ADDRESS (number and street) PO Box 250
 Check if different than previously reported. (ACC) Newburgh IN 47629

2. **FEC IDENTIFICATION NUMBER** C C00468256 3. IS THIS REPORT NEW (N) **OR** AMENDED (A) IN 08

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 Year-End Report (YE)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on 05 / 08 / 2012 in the State of IN
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on 05 / 08 / 2012 in the State of IN

5. Covering Period 04 / 01 / 2012 through 04 / 18 / 2012

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 Mr. John L. Wright

Signature of Treasurer Mr. John L. Wright *[Electronically Filed]* Date 04 / 25 / 2012

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Bucshon for Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	1800.00	645880.60
(b) Total Contribution Refunds (from Line 20(d))	0.00	6000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	1800.00	639880.60
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	142490.57	424657.53
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	1736.10
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	142490.57	422921.43
8. Cash on Hand at Close of Reporting Period (from Line 27).....	266423.74	
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).....	0.00	

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

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Bucshon for Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1000.00	340549.60
(ii) Unitemized.....	300.00	20031.00
(iii) TOTAL of contributions from individuals ▶	1300.00	360580.60
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	500.00	285300.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	1800.00	645880.60
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	1589.56
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 Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	1736.10
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	249.09
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	1800.00	649455.35

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	142490.57	424657.53
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	53500.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	53500.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	500.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	5500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	6000.00
21. OTHER DISBURSEMENTS	0.00	5750.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	142490.57	489907.53

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	407114.31
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	1800.00
25. SUBTOTAL (add Line 23 and Line 24).....	408914.31
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	142490.57
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	266423.74

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 18
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Bucshon for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Gregg Fore

Mailing Address 13364 Wooded Knoll Trail

City Middlebury State IN Zip Code 46540

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

Name of Employer Dicor Occupation President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 12 / 2012

Transaction ID : SA11AI.10984

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Mr. Douglas N. Gaeddert

Mailing Address 25128 CR 20

City Elkhart State IN Zip Code 46517

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

Name of Employer Forest River, Inc. Occupation General Manager

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 12 / 2012

Transaction ID : SA11AI.10983

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Mr. Mark W. Weller

Mailing Address 2669 Glencroft Road

City Vienna State VA Zip Code 22181-6319

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

Name of Employer Thal LLP Occupation Government Affairs

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 12 / 2012

Transaction ID : SA11AI.10985

Amount of Each Receipt this Period
 250.00

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

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

1000.00

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 18
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Bucshon for Congress

A. Full Name (Last, First, Middle Initial)
FAEGREBD CONSULTING PAC

Mailing Address 300 N. MERIDIAN STREET
SUITE 2700

City INDIANAPOLIS State IN Zip Code 46204

FEC ID number of contributing federal political committee. **C** C00386904

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 12 / 2012

Transaction ID : SA11C.11010

Amount of Each Receipt this Period
500.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

500.00

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 18			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Bucshon for Congress

Full Name (Last, First, Middle Initial) A. Erin Casey		Date of Disbursement MM / DD / YYYY 04 / 03 / 2012
Mailing Address 514 G Street SE		Amount of Each Disbursement this Period 3081.32 Transaction ID : SB17.10860
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Fundraising Consultant	Category/ Type 003
Candidate Name Bucshon for Congress	Office Sought: <input checked="" 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: IN District: 08	

Full Name (Last, First, Middle Initial) B. Cybersource Corporation		Date of Disbursement MM / DD / YYYY 04 / 03 / 2012
Mailing Address 1295 Charleston Road		Amount of Each Disbursement this Period 34.95 Transaction ID : SB17.10844
City Mountain View	State CA	
Zip Code 94043	Purpose of Disbursement Credit Card Processing Fee	Category/ Type 003
Candidate Name Bucshon for Congress	Office Sought: <input checked="" 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: IN District: 08	

Full Name (Last, First, Middle Initial) c. Evansville Print Specialist		Date of Disbursement MM / DD / YYYY 04 / 12 / 2012
Mailing Address 2217 W. Franklin Street		Amount of Each Disbursement this Period 1020.17 Transaction ID : SB17.10883
City Evansville	State IN	
Zip Code 47712	Purpose of Disbursement Printing	Category/ Type 003
Candidate Name Bucshon for Congress	Office Sought: <input checked="" 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: IN District: 08	

SUBTOTAL of Disbursements This Page (optional).....	4136.44
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 OF 18	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Bucshon for Congress

Full Name (Last, First, Middle Initial) A. Gateway Billing		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2012
Mailing Address 808 East Utah Valley Drive		Amount of Each Disbursement this Period 20.00 Transaction ID : SB17.10843
City American Fork State UT Zip Code 84003	Purpose of Disbursement Credit Card Processing Fee 003 Category/Type	
Candidate Name Bucshon for Congress	Office Sought: <input checked="" 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: IN District: 08		

Full Name (Last, First, Middle Initial) B. Gridiron Communications		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2012
Mailing Address 12650 Adams Road		Amount of Each Disbursement this Period 20908.63 Transaction ID : SB17.10869
City Granger State IN Zip Code 46530	Purpose of Disbursement Printing and Postage 003 Category/Type	
Candidate Name Bucshon for Congress	Office Sought: <input checked="" 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: IN District: 08		

Full Name (Last, First, Middle Initial) c. Mr. Justin Groenert		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address 639 Belmont Drive		Amount of Each Disbursement this Period 449.75 Transaction ID : SB17.10850
City Evansville State IN Zip Code 47711	Purpose of Disbursement Payroll 001 Category/Type	
Candidate Name Bucshon for Congress	Office Sought: <input checked="" 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: IN District: 08		

SUBTOTAL of Disbursements This Page (optional).....	21378.38
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 18
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Bucshon for Congress

Full Name (Last, First, Middle Initial) A. Huckaby Davis Lisker, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address 228 South Washington Street Suite 115		Amount of Each Disbursement this Period 1176.20 Transaction ID : SB17.10858
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Compliance Consulting	Category/ Type 001
Candidate Name Bucshon for Congress	Office Sought: <input checked="" 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: IN District: 08	

Full Name (Last, First, Middle Initial) B. Mr. Matthew D. Humm		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address 1016 Summer Hill		Amount of Each Disbursement this Period 1032.15 Transaction ID : SB17.10851
City Carmel	State IN	
Zip Code 46032	Purpose of Disbursement Payroll	Category/ Type 001
Candidate Name Bucshon for Congress	Office Sought: <input checked="" 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: IN District: 08	

Full Name (Last, First, Middle Initial) c. Mr. Matthew D. Humm		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2012
Mailing Address 1016 Summer Hill		Amount of Each Disbursement this Period 698.59 Transaction ID : SB17.10886
City Carmel	State IN	
Zip Code 46032	Purpose of Disbursement Payroll	Category/ Type 001
Candidate Name Bucshon for Congress	Office Sought: <input checked="" 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: IN District: 08	

SUBTOTAL of Disbursements This Page (optional).....	2906.94
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 OF 18	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Bucshon for Congress

Full Name (Last, First, Middle Initial) A. Mr. Matthew D. Humm		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2012
Mailing Address 1016 Summer Hill		Amount of Each Disbursement this Period 136.05 Transaction ID : SB17.10890
City Carmel State IN Zip Code 46032	Purpose of Disbursement Mileage and food for volunteers Category/Type 002	
Candidate Name Bucshon for Congress	Office Sought: <input checked="" 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: IN District: 08		

Full Name (Last, First, Middle Initial) B. Indiana Department of Revenue		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2012
Mailing Address PO Box 7221		Amount of Each Disbursement this Period 249.83 Transaction ID : SB17.10868
City Indianapolis State IN Zip Code 46207-7221	Purpose of Disbursement Payroll Taxes Category/Type 001	
Candidate Name Bucshon for Congress	Office Sought: <input checked="" 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: IN District: 08		

Full Name (Last, First, Middle Initial) c. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2012
Mailing Address Department of the Treasury		Amount of Each Disbursement this Period 1282.08 Transaction ID : SB17.10867
City Ogden State UT Zip Code 84201-0005	Purpose of Disbursement Payroll Taxes Category/Type 001	
Candidate Name Bucshon for Congress	Office Sought: <input checked="" 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: IN District: 08		

SUBTOTAL of Disbursements This Page (optional).....	1667.96
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 18	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Bucshon for Congress

Full Name (Last, First, Middle Initial) A. Merchant Service c/o Old National Bank		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address PO Box 718		Amount of Each Disbursement this Period 30.00 Transaction ID : SB17.10845
City Evansville	State IN	
Zip Code 47705	Purpose of Disbursement Credit Card Processing Fee	Category/ Type 003
Candidate Name Bucshon for Congress		
Office Sought: <input checked="" 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: IN	District: 08	

Full Name (Last, First, Middle Initial) B. Merchant Service c/o Old National Bank		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address PO Box 718		Amount of Each Disbursement this Period 60.00 Transaction ID : SB17.10846
City Evansville	State IN	
Zip Code 47705	Purpose of Disbursement Credit Card Processing Fee	Category/ Type 003
Candidate Name Bucshon for Congress		
Office Sought: <input checked="" 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: IN	District: 08	

Full Name (Last, First, Middle Initial) c. Mr. Ryan Patrick Murphy		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address 4001 Weyburn Place		Amount of Each Disbursement this Period 1769.72 Transaction ID : SB17.10852
City Plano	State TX	
Zip Code 75023	Purpose of Disbursement Payroll	Category/ Type 001
Candidate Name Bucshon for Congress		
Office Sought: <input checked="" 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: IN	District: 08	

SUBTOTAL of Disbursements This Page (optional).....	1859.72
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 18			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Bucshon for Congress

Full Name (Last, First, Middle Initial) A. Mr. Ryan Patrick Murphy		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2012
Mailing Address 4001 Weyburn Place		Amount of Each Disbursement this Period 1769.71 Transaction ID : SB17.10887
City Plano	State TX	
Purpose of Disbursement Payroll		001 Category/ Type
Candidate Name Bucshon for Congress	Office Sought: <input checked="" 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: IN	District: 08	

Full Name (Last, First, Middle Initial) B. Mr. Ryan Patrick Murphy		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2012
Mailing Address 4001 Weyburn Place		Amount of Each Disbursement this Period 148.68 Transaction ID : SB17.10891
City Plano	State TX	
Purpose of Disbursement Mileage		001 Category/ Type
Candidate Name Bucshon for Congress	Office Sought: <input checked="" 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: IN	District: 08	

Full Name (Last, First, Middle Initial) c. Old National Bank		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address 8577 Ruffian Lane		Amount of Each Disbursement this Period 25.00 Transaction ID : SB17.10847
City Newburgh	State IN	
Purpose of Disbursement Wire Transfer Fee		001 Category/ Type
Candidate Name Bucshon for Congress	Office Sought: <input checked="" 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: IN	District: 08	

SUBTOTAL of Disbursements This Page (optional).....	1943.39
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 18			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Bucshon for Congress

Full Name (Last, First, Middle Initial) A. Piryx Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2012
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 4.50 Transaction ID : SB17.10865
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Credit Card Processing Fee	Category/Type 003	
Candidate Name Bucshon for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: IN District: 08	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Mr. Steven L. Reeves		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address 113 Olive Drive		Amount of Each Disbursement this Period 1927.50 Transaction ID : SB17.10856
City Princeton	State IN Zip Code 47670	
Purpose of Disbursement Fundraising Consultant Fees	Category/Type 003	
Candidate Name Bucshon for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: IN District: 08	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Right to Life of SW Indiana		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2012
Mailing Address 20 NW Fourth Street Suite 308		Amount of Each Disbursement this Period 550.00 Transaction ID : SB17.10861
City Evansville	State IN Zip Code 47708	
Purpose of Disbursement Event Tickets/Sponsorship	Category/Type 004	
Candidate Name Bucshon for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: IN District: 08	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	2482.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 18			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Bucshon for Congress

Full Name (Last, First, Middle Initial) A. Rising Tide Media Group LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2012
Mailing Address 226 S. Fayette		Amount of Each Disbursement this Period 9800.00 Transaction ID : SB17.10859
City Alexandra	State VA	
Zip Code 22314	Purpose of Disbursement Commercials	Category/ Type 004
Candidate Name Bucshon for Congress	Office Sought: <input checked="" 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: IN District: 08	

Full Name (Last, First, Middle Initial) B. Saint Bernard Catholic School		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2012
Mailing Address 547 Elm Street		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.10895
City Rockport	State IN	
Zip Code 47634	Purpose of Disbursement Advertising/Sponsorship	Category/ Type 004
Candidate Name Bucshon for Congress	Office Sought: <input checked="" 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: IN District: 08	

Full Name (Last, First, Middle Initial) c. Strategic Media Services, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address 3299 K Street NW Suite 200		Amount of Each Disbursement this Period 89560.00 Transaction ID : SB17.10848
City Washington	State DC	
Zip Code 20007	Purpose of Disbursement Television & Cable Media Buy	Category/ Type 004
Candidate Name Bucshon for Congress	Office Sought: <input checked="" 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: IN District: 08	

SUBTOTAL of Disbursements This Page (optional).....	99860.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 18			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Bucshon for Congress

Full Name (Last, First, Middle Initial) A. The Prosper Group Corporation		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2012
Mailing Address 435 E. Main Street Suite 250		Amount of Each Disbursement this Period 2594.87
City Greenwood	State IN Zip Code 46143	
Purpose of Disbursement Website Development	Category/Type 004	Transaction ID : SB17.10866
Candidate Name Bucshon for Congress	Office Sought: <input checked="" 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: IN District: 08	

Full Name (Last, First, Middle Initial) B. Mr. James O. Town		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address 155 Brentwood Circle		Amount of Each Disbursement this Period 895.89
City Evansville	State IN Zip Code 47715	
Purpose of Disbursement Payroll	Category/Type 001	Transaction ID : SB17.10853
Candidate Name Bucshon for Congress	Office Sought: <input checked="" 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: IN District: 08	

Full Name (Last, First, Middle Initial) c. Mr. James O. Town		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2012
Mailing Address 155 Brentwood Circle		Amount of Each Disbursement this Period 968.37
City Evansville	State IN Zip Code 47715	
Purpose of Disbursement Payroll	Category/Type 001	Transaction ID : SB17.10888
Candidate Name Bucshon for Congress	Office Sought: <input checked="" 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: IN District: 08	

SUBTOTAL of Disbursements This Page (optional).....	4459.13
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 16 OF 18	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Bucshon for Congress

Full Name (Last, First, Middle Initial) A. Mr. James O. Town		Date of Disbursement MM / DD / YYYY 04 / 13 / 2012
Mailing Address 155 Brentwood Circle		Amount of Each Disbursement this Period 282.96 Transaction ID : SB17.10889
City Evansville	State IN	
Purpose of Disbursement Mileage and food for volunteers		Category/ Type 002
Candidate Name Bucshon for Congress		
Office Sought: <input checked="" 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: IN	District: 08	

Full Name (Last, First, Middle Initial) B. U.S. Post Office		Date of Disbursement MM / DD / YYYY 04 / 12 / 2012
Mailing Address 800 Sycamore Street		Amount of Each Disbursement this Period 422.58 Transaction ID : SB17.10882
City Evansville	State IN	
Purpose of Disbursement Postage		Category/ Type 007
Candidate Name Bucshon for Congress		
Office Sought: <input checked="" 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: IN	District: 08	

Full Name (Last, First, Middle Initial) C. USINCUBATOR, LLC		Date of Disbursement MM / DD / YYYY 04 / 02 / 2012
Mailing Address 815 John Street Suite 110		Amount of Each Disbursement this Period 520.00 Transaction ID : SB17.10855
City Evansville	State IN	
Purpose of Disbursement Office Rent		Category/ Type 001
Candidate Name Bucshon for Congress		
Office Sought: <input checked="" 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: IN	District: 08	

SUBTOTAL of Disbursements This Page (optional).....	1225.54
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 17 OF 18	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Bucshon for Congress

Full Name (Last, First, Middle Initial) A. Vanderburgh County Republican Party		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2012
Mailing Address 815 John Street		Amount of Each Disbursement this Period 150.00 Transaction ID : SB17.10885
City Evansville State IN Zip Code 47713-2746	Purpose of Disbursement Event Tickets Category/Type 007	
Candidate Name Bucshon for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 08	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2012
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 213.12 Transaction ID : SB17.10881
City Lehigh Valley State PA Zip Code 18002-5505	Purpose of Disbursement Cell Phone Charges Category/Type 001	
Candidate Name Bucshon for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 08	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement 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).....	363.12
TOTAL This Period (last page this line number only).....	142282.62

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Bucshon for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Huckaby Davis Lisker, Inc.		Nature of Debt (Purpose): Compliance Consulting
Mailing Address 228 South Washington Street Suite 115		
City State	Zip Code	
Alexandria	VA 22314	

Outstanding Balance Beginning This Period	Transaction ID : SD10.10834	
<input type="text" value="1176.20"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="1176.20"/>	<input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State	Zip Code	

Outstanding Balance Beginning This Period		
<input type="text"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State	Zip Code	

Outstanding Balance Beginning This Period		
<input type="text"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="0.00"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="0.00"/>