

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

The Fund for American Exceptionalism

ADDRESS (number and street)

1801 N Shutt Hill Road

☐ Check if different than previously reported. (ACC)

Huntington

IN

46750-9101

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00512855

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☒ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

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 Michael J Erler Sr

Signature of Treasurer

Michael J Erler Sr

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

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

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

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

The Fund for American Exceptionalism

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
07 01 2013 To: M M / D D / Y Y Y Y Y Y  
12 31 2013

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2013</span>		<span style="border: 1px solid black; padding: 2px;">7546.19</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">4957.25</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">51700</span>	<span style="border: 1px solid black; padding: 2px;">59200</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">56657.25</span>	<span style="border: 1px solid black; padding: 2px;">66746.19</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">30197.22</span>	<span style="border: 1px solid black; padding: 2px;">40286.16</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">26460.03</span>	<span style="border: 1px solid black; padding: 2px;">26460.03</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0</span>	

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

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

The Fund for American Exceptionalism

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y  
07 01 2013

To:

M M / D D / Y Y Y Y Y  
12 31 2013
**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).....

45500

50500

(ii) Unitemized .....

200

200

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

45700

50700

(b) Political Party Committees .....

0

0

(c) Other Political Committees

(such as PACs).....

6000

8500

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

51700

59200

## 12. Transfers From Affiliated/Other

Party Committees.....

0

0

## 13. All Loans Received .....

0

0

## 14. Loan Repayments Received.....

0

0

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0

0

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0

0

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0

0

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0

0

(b) Levin Funds (from Schedule H5) .....

0

0

(c) Total Transfers (add 18(a) and 18(b))..

0

0

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

51700

59200

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

51700

59200

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures .....	15197.22	24251.16
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	15197.22	24251.16
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	12500	11000
24. Independent Expenditures (use Schedule E) .....	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0	0
(b) Political Party Committees .....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0	0
29. Other Disbursements .....	2500	5035
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0	0
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	30197.22	40286.16
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	30197.22	40286.16

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	51700	59200
34. Total Contribution Refunds (from Line 28(d)) .....	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	51700	59200
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	15197.22	24251.16
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	15197.22	24251.16

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

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

FOR LINE NUMBER: PAGE 6 OF 35

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Fund for American Exceptionalism

Full Name (Last, First, Middle Initial)

A. Dean V White

Mailing Address 1000 E 80th Place  
Suite 700N

City State Zip Code  
Merrillville IN 46410-5676

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self

Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000

Date of Receipt

M M / D D / Y Y Y Y Y  
12 18 2013

Transaction ID : 360-3-M

Amount of Each Receipt this Period

-5000

Redesignation to General

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Dean V White

Mailing Address 1000 E 80th Place  
Suite 700N

City State Zip Code  
Merrillville IN 46410-5676

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self

Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000

Date of Receipt

M M / D D / Y Y Y Y Y  
12 18 2013

Transaction ID : 360-4-M

Amount of Each Receipt this Period

5000

Redesignation to General

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Edward M Bakwin

Mailing Address 433 US Highway 20

City State Zip Code  
La Porte IN 46350

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250

Date of Receipt

M M / D D / Y Y Y Y Y  
12 18 2013

Transaction ID : 361-292-c

Amount of Each Receipt this Period

250

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

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

250.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 7 OF 35

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

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NAME OF COMMITTEE (In Full)

**The Fund for American Exceptionalism**

Full Name (Last, First, Middle Initial)

**A. Bharat H. Barai**

Mailing Address 9903 Twin Creek Boulevard

City

Munster

State

IN

Zip Code

46321-4231

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Premier Oncology Hematology

Occupation

Medical Doctor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 23 / 2013

**Transaction ID : 38-265-c**

Amount of Each Receipt this Period

2600

Full Name (Last, First, Middle Initial)

**B. Bos Dairy, LLC**

Mailing Address 10777 W 700 N

City

Fair Oaks

State

IN

Zip Code

47943-8529

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 28 / 2013

**Transaction ID : 356-287-c**

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

**C. Steven Bos**

Mailing Address 12328 Driftwood Drive

City

Demotte

State

IN

Zip Code

46310-7925

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Windy Ridge Dairy Farm

Occupation

Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 28 / 2013

**Transaction ID : 357-288-c**

Amount of Each Receipt this Period

1000

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

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

4600.00

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

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

FOR LINE NUMBER: PAGE 8 OF 35  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**The Fund for American Exceptionalism**

Full Name (Last, First, Middle Initial)

**A. Paul R Chael**

Mailing Address 231 Edgewood Drive

City

Valparaiso

State

IN

Zip Code

46385-7382

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Attorney

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250

Date of Receipt

MM / DD / YYYY  
10 / 23 / 2013

**Transaction ID : 344-276-c**

Amount of Each Receipt this Period

250

Full Name (Last, First, Middle Initial)

**B. Wil Davis**

Mailing Address 7807 Lake Shore Drive

City

Gary

State

IN

Zip Code

46403-1337

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Gary Jet Center, Inc

Occupation

President/CEO

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500

Date of Receipt

MM / DD / YYYY  
10 / 23 / 2013

**Transaction ID : 340-272-c**

Amount of Each Receipt this Period

500

Full Name (Last, First, Middle Initial)

**C. Kevin Dillon**

Mailing Address 1755 94th Avenue NE

City

Clyde Hill

State

WA

Zip Code

98004-3420

FEC ID number of contributing  
federal political committee.

C

Name of Employer

App World Inc.

Occupation

President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000

Date of Receipt

MM / DD / YYYY  
08 / 18 / 2013

**Transaction ID : 331-260-c**

Amount of Each Receipt this Period

4000

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

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

4750.00



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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 35  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**The Fund for American Exceptionalism**

Full Name (Last, First, Middle Initial)

## **A. Fair Oaks Dairy Farm, LLC**

Mailing Address 5431 E. 600 North Road

City State Zip Code  
Fair Oaks IN 47943

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000

Date of Receipt

M M / D D / Y Y Y Y Y  
12 28 2013

**Transaction ID : 359-290-c**

Amount of Each Receipt this Period

5000

Full Name (Last, First, Middle Initial)

## **B. Donald P. Fesko**

Mailing Address 1216 Ballybunion Court

City State Zip Code  
Dyer IN 46311-1268

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Community Hospital

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500

Date of Receipt

M M / D D / Y Y Y Y Y  
10 23 2013

**Transaction ID : 342-274-c**

Amount of Each Receipt this Period

500

Full Name (Last, First, Middle Initial)

## **C. Timothy Fesko**

Mailing Address 911 Ridge Road

City State Zip Code  
Munster IN 46321-1721

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self

Real Estate & Insurance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500

Date of Receipt

M M / D D / Y Y Y Y Y  
10 23 2013

**Transaction ID : 336-268-c**

Amount of Each Receipt this Period

500

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

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

6000.00

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 35

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Fund for American Exceptionalism

Full Name (Last, First, Middle Initial)

**A. William I Fine**

Mailing Address 1341 Fitzgerald Drive

City

Munster

State

IN

Zip Code

46321-4203

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Attorney

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 20 / 2013

Transaction ID : 348-284-c

Amount of Each Receipt this Period

250

Full Name (Last, First, Middle Initial)

**B. William I Fine**

Mailing Address 1341 Fitzgerald Drive

City

Munster

State

IN

Zip Code

46321-4203

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Attorney

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2013

Transaction ID : 348-329-c

Amount of Each Receipt this Period

250

Full Name (Last, First, Middle Initial)

**C. Marcia Forcey**

Mailing Address 668 E 900 N

City

Westville

State

IN

Zip Code

46391-9442

FEC ID number of contributing  
federal political committee.

C

Name of Employer

McColly Real Estate

Occupation

Real Estate Agent

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2600

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 30 / 2013

Transaction ID : 37-262-c

Amount of Each Receipt this Period

2600

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

3100.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 35

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**The Fund for American Exceptionalism**

Full Name (Last, First, Middle Initial)

**A. Ronald J Gidwitz**

Mailing Address 200 S Wacker Drive

City  
Chicago

State  
IL

Zip Code  
60606-5829

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Riverbend Industries

Occupation  
Principal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 30 / 2013

**Transaction ID : 332-263-c**

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

**B. Dietrich M Gross**

Mailing Address 769 Michigan Avenue

City  
Wilmette

State  
IL

Zip Code  
60091-1956

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Jupiter Oxygen Corp

Occupation  
Chairman/CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 30 / 2013

**Transaction ID : 237-261-c**

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

**c. Herrema Dairy, LLC**

Mailing Address 10998 W 500 N

City  
Fair Oaks

State  
IN

Zip Code  
47943-8541

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 28 / 2013

**Transaction ID : 355-286-c**

Amount of Each Receipt this Period

1000

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

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

3000.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 12 OF 35

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

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NAME OF COMMITTEE (In Full)

**The Fund for American Exceptionalism**

Full Name (Last, First, Middle Initial)

## **A. Hidden View Dairy, Llc**

Mailing Address 1498 W State Road 14

City Rensselaer State IN Zip Code 47978-8549

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000

Date of Receipt

11 / 20 / 2013

**Transaction ID : 354-285-c**

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

## **B. Bruce H Leetz**

Mailing Address 570 N 90 E

City Valparaiso State IN Zip Code 46383-9115

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

North Coast Distributing

President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000

Date of Receipt

10 / 23 / 2013

**Transaction ID : 337-269-c**

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

## **C. James Loshbough**

Mailing Address PO Box 400

City Elkhart State IN Zip Code 46515-0400

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

McDowell Enterprises Inc

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250

Date of Receipt

12 / 31 / 2013

**Transaction ID : 350-328-c**

Amount of Each Receipt this Period

250

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

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

2250.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 13 OF 35

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

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NAME OF COMMITTEE (In Full)

**The Fund for American Exceptionalism**

Full Name (Last, First, Middle Initial)

**A. Michael W Mcphillips**

Mailing Address 8473 Morse Court

City

Crown Point

State

IN

Zip Code

46307-9640

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INDOT

Occupation

District Deputy Commissioner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 23 / 2013

**Transaction ID : 343-275-c**

Amount of Each Receipt this Period

250

Full Name (Last, First, Middle Initial)

**B. Gus Olympidis**

Mailing Address 213 S State Road 49

City

Valparaiso

State

IN

Zip Code

46383-7976

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Family Express Corporation

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 23 / 2013

**Transaction ID : 334-266-c**

Amount of Each Receipt this Period

2600

Full Name (Last, First, Middle Initial)

**C. John S Pruzin**

Mailing Address 7109 Calumet Avenue

City

Hammond

State

IN

Zip Code

46324-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Solin-Pruzin Funeral Home

Occupation

Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 23 / 2013

**Transaction ID : 345-277-c**

Amount of Each Receipt this Period

250

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

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

3100.00

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

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

FOR LINE NUMBER: PAGE 14 OF 35  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**The Fund for American Exceptionalism**

Full Name (Last, First, Middle Initial)

**A. James Rivich**

Mailing Address 3143 Strong Street

City Highland State IN Zip Code 46322-1445

FEC ID number of contributing federal political committee.

C

Name of Employer

J Rivich & Assoc

Occupation

Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500

Date of Receipt

10 / 23 / 2013

**Transaction ID : 341-273-c**

Amount of Each Receipt this Period

500

Full Name (Last, First, Middle Initial)

**B. Patrick J Schacki**

Mailing Address PO Box 404

City Valparaiso State IN Zip Code 46384-0404

FEC ID number of contributing federal political committee.

C

Name of Employer

Grand Corporation

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600

Date of Receipt

10 / 23 / 2013

**Transaction ID : 335-267-c**

Amount of Each Receipt this Period

2600

Full Name (Last, First, Middle Initial)

**C. Thomas R Schilli**

Mailing Address PO Box 351

City Remington State IN Zip Code 47977-0351

FEC ID number of contributing federal political committee.

C

Name of Employer

Schilli Transportation

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000

Date of Receipt

10 / 23 / 2013

**Transaction ID : 339-271-c**

Amount of Each Receipt this Period

1000

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

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

4100.00

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

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

FOR LINE NUMBER: PAGE 15 OF 35  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**The Fund for American Exceptionalism**

Full Name (Last, First, Middle Initial)

**A. Donald Starks**

Mailing Address PO Box 508

City State Zip Code  
 Bourbonnais IL 60914-0508

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 Mortgage Services III National Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 31 2013

**Transaction ID : 414-326-c**

Amount of Each Receipt this Period

2600

Full Name (Last, First, Middle Initial)

**B. Joel Van Ravenswaay**

Mailing Address 5602 Fountain View Drive

City State Zip Code  
 Wheatfield IN 46392-7050

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 Newberry Farms Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 28 2013

**Transaction ID : 358-289-c**

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

**C. Glenn S Vician**

Mailing Address 99 E 86th Avenue

City State Zip Code  
 Merrillville IN 46410-6381

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 Bowman Heintz Boscia Vician Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 31 2013

**Transaction ID : 349-327-c**

Amount of Each Receipt this Period

250

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

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

3850.00

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

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

FOR LINE NUMBER: PAGE 16 OF 35

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Fund for American Exceptionalism

Full Name (Last, First, Middle Initial)

**A. Chuck Weiter**

Mailing Address 3001 Leonard Drive

City

Valparaiso

State

IN

Zip Code

46383-2733

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Valparaiso First Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2013

Transaction ID : 351-325-c

Amount of Each Receipt this Period

500

Full Name (Last, First, Middle Initial)

**B. Dean V White**Mailing Address 1000 E 80th Place  
Suite 700N

City

Merrillville

State

IN

Zip Code

46410-5676

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Owner

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

10000

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 18 / 2013

Transaction ID : 360-291-c

Amount of Each Receipt this Period

10000

Full Name (Last, First, Middle Initial)

**C. Jeanell Bos**

Mailing Address 7921 Wedgwood Court

City

Demotte

State

IN

Zip Code

46310-9486

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Bos Dairy, LLC

Occupation

Owner

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 28 / 2013

Transaction ID : 419-287-P

Amount of Each Receipt this Period

1000

**[MEMO ITEM]**

Partnership Subitemization of Bos Dairy, LLC

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

10500.00

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



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 17 OF 35

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

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NAME OF COMMITTEE (In Full)

**The Fund for American Exceptionalism**

Full Name (Last, First, Middle Initial)

## **A. Derek Herrema**

Mailing Address 12361 Driftwood Drive

City State Zip Code  
 Demotte IN 46310-7925

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Herrema Dairy

Occupation

Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 28 2013

**Transaction ID : 417-286-P**

Amount of Each Receipt this Period

1000

**[MEMO ITEM]**

Partnership Subitemization of Herrema Dairy, LLC

Full Name (Last, First, Middle Initial)

## **B. Michael J McCloskey**

Mailing Address 856 N 600 E

City State Zip Code  
 Fair Oaks IN 47943-8000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Fair Oaks Dairy Farm

Occupation

Dairy Farmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 28 2013

**Transaction ID : 420-290-P**

Amount of Each Receipt this Period

5000

**[MEMO ITEM]**

Partnership Subitemization of Fair Oaks Dairy Farm, LLC

Full Name (Last, First, Middle Initial)

## **C. Fred Schakel**

Mailing Address 10420 mulligan drive

City State Zip Code  
 rensse laer IN 47978

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hidden View Dairy

Occupation

Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000

Date of Receipt

M M / D D / Y Y Y Y Y  
 11 20 2013

**Transaction ID : 353-285-P**

Amount of Each Receipt this Period

1000

**[MEMO ITEM]**

Partnership Subitemization of Hidden View Dairy, LLC

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

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

0.00

45500.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 18 OF 35

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

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NAME OF COMMITTEE (In Full)

**The Fund for American Exceptionalism**

Full Name (Last, First, Middle Initial)

## **A. Every Republican Is Crucial (ericpac)**

Mailing Address 25 E Main Street  
Suite 200

City Richmond State VA Zip Code 23219-2109

FEC ID number of contributing  
federal political committee.

**C** C00384701

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 23 / 2013

**Transaction ID : 338-270-c**

Amount of Each Receipt this Period

5000

Full Name (Last, First, Middle Initial)

## **B. International Union Of Operating Engineers Local 150 Political Action Committee**

Mailing Address 6200 Joliet Road

City Countryside State IL Zip Code 60525-3957

FEC ID number of contributing  
federal political committee.

**C** C00142851

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 23 / 2013

**Transaction ID : 347-279-c**

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

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

6000.00

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

6000.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 35

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**The Fund for American Exceptionalism**

Full Name (Last, First, Middle Initial)

**A. Aristotle International Inc**

Mailing Address 205 Pennsylvania Avenue SE

City Washington      State DC      Zip Code 20003-1164

Purpose of Disbursement  
Compliance software fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 18 / 2013
**Transaction ID : SB21B-10-306-e**

Amount of Each Disbursement this Period

600

Full Name (Last, First, Middle Initial)

**B. Aristotle International Inc**

Mailing Address 205 Pennsylvania Avenue SE

City Washington      State DC      Zip Code 20003-1164

Purpose of Disbursement  
Compliance software fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 11 / 2013
**Transaction ID : SB21B-10-316-e**

Amount of Each Disbursement this Period

600

Full Name (Last, First, Middle Initial)

**C. Business Card**

Mailing Address PO Box 15469

City Wilmington      State DE      Zip Code 19886-5469

Purpose of Disbursement  
Fundraising travel Eric Cantor

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 11 / 2013
**Transaction ID : SB21B-376-317-e**

Amount of Each Disbursement this Period

522.03

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

1722.03

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 OF 35

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**The Fund for American Exceptionalism**

Full Name (Last, First, Middle Initial)

**A. Fifth Third Bank**

Mailing Address 5925 Illinois Road

City Fort Wayne      State IN      Zip Code 46804-1159

Purpose of Disbursement  
Credit card payment

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 05 / 2013
**Transaction ID : SB21B-4-293-e**

Amount of Each Disbursement this Period

80.65

Full Name (Last, First, Middle Initial)

**B. Speedway**

Mailing Address 401 Kentucky Avenue

City Indianapolis      State IN      Zip Code 46225-1123

Purpose of Disbursement  
Auto expense

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 05 / 2103
**Transaction ID : SB21B-322-29-V**

Amount of Each Disbursement this Period

148.38

**[MEMO ITEM]**

Subitemization of Fifth Third Bank ( 07/05/13 )

Full Name (Last, First, Middle Initial)

**C. McNamara Florists**

Mailing Address 3969 E 82nd Street

City Indianapolis      State IN      Zip Code 46240-2468

Purpose of Disbursement  
Gifts for volunteers

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 05 / 2013
**Transaction ID : SB21B-314-30-V**

Amount of Each Disbursement this Period

108.05

**[MEMO ITEM]**

Subitemization of Fifth Third Bank ( 07/05/13 )

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

80.65

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 21 OF 35

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**The Fund for American Exceptionalism**

Full Name (Last, First, Middle Initial)

**A. Fifth Third Bank**

Mailing Address 5925 Illinois Road

City Fort Wayne      State IN      Zip Code 46804-1159

Purpose of Disbursement  
Credit card payment

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 05 / 2013
**Transaction ID : SB21B-4-294-e**

Amount of Each Disbursement this Period

319.42

Full Name (Last, First, Middle Initial)

**B. McNamara Florists**

Mailing Address 3969 E 82nd Street

City Indianapolis      State IN      Zip Code 46240-2468

Purpose of Disbursement  
Gifts for volunteers

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 27 / 2013
**Transaction ID : SB21B-314-34-V**

Amount of Each Disbursement this Period

166.9

**[MEMO ITEM]**

Subitemization of Fifth Third Bank ( 07/27/13 )

Full Name (Last, First, Middle Initial)

**C. Speedway**

Mailing Address 401 Kentucky Avenue

City Indianapolis      State IN      Zip Code 46225-1123

Purpose of Disbursement  
Auto expense

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 27 / 2013
**Transaction ID : SB21B-322-37-V**

Amount of Each Disbursement this Period

52.35

**[MEMO ITEM]**

Subitemization of Fifth Third Bank ( 07/27/13 )

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

319.42

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 22 OF 35

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

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NAME OF COMMITTEE (In Full)

**The Fund for American Exceptionalism**

Full Name (Last, First, Middle Initial)

**A. Carroll Co Airport Auth**

Mailing Address PO Box 266

City	State	Zip Code
Carrollton	OH	44615-0266

Purpose of Disbursement  
Air travel expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2013

**Transaction ID : SB21B-393-38-V**

Amount of Each Disbursement this Period

469.05
--------

**[MEMO ITEM]**

Subitemization of Fifth Third Bank ( 07/27/13 )

Full Name (Last, First, Middle Initial)

**B. Eagle Creek Aviation Services**

Mailing Address 4101 Dandy Trail

City	State	Zip Code
Indianapolis	IN	46254-9200

Purpose of Disbursement  
Air travel expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2013

**Transaction ID : SB21B-394-39-V**

Amount of Each Disbursement this Period

258.15
--------

**[MEMO ITEM]**

Subitemization of Fifth Third Bank ( 07/27/13 )

Full Name (Last, First, Middle Initial)

**C. Mo's A Place for Steak**

Mailing Address 47 S Pennsylvania Street

City	State	Zip Code
Indianapolis	IN	46204-3698

Purpose of Disbursement  
Food/bev for fundraiser

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2013

**Transaction ID : SB21B-395-40-V**

Amount of Each Disbursement this Period

350.39
--------

**[MEMO ITEM]**

Subitemization of Fifth Third Bank ( 07/27/13 )

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

0.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 23 OF 35

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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

NAME OF COMMITTEE (In Full)

**The Fund for American Exceptionalism**

Full Name (Last, First, Middle Initial)

**A. NWL Lodging**

Mailing Address 1001 Lafayette Drive

City Farmington      State PA      Zip Code 15437-9754

Purpose of Disbursement  
Travel expense

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07      27      2013
**Transaction ID : SB21B-396-41-V**

Amount of Each Disbursement this Period

964.48

**[MEMO ITEM]**

Subitemization of Fifth Third Bank ( 07/27/13 )

Full Name (Last, First, Middle Initial)

**B. Fifth Third Bank**

Mailing Address 5925 Illinois Road

City Fort Wayne      State IN      Zip Code 46804-1159

Purpose of Disbursement  
Credit card payment

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07      27      2013
**Transaction ID : SB21B-4-295-e**

Amount of Each Disbursement this Period

2376.2

Full Name (Last, First, Middle Initial)

**C. Hotel Alyeska**

Mailing Address 1000 Arlberg Ave

City Girdwood      State AK      Zip Code 99587

Purpose of Disbursement  
Lodging for fundraiser

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08      18      2013
**Transaction ID : SB21B-399-44-V**

Amount of Each Disbursement this Period

1065.92

**[MEMO ITEM]**

Subitemization of Fifth Third Bank ( 08/18/13 )

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

2376.20

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 24 OF 35

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**The Fund for American Exceptionalism**

Full Name (Last, First, Middle Initial)

**A. Rayburn**

Mailing Address 45 Independence Ave SW

City Washington      State DC      Zip Code 20003

Purpose of Disbursement  
Meeting expense

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 18 / 2013
**Transaction ID : SB21B-316-45-V**

Amount of Each Disbursement this Period

142.35

**[MEMO ITEM]**

Subitemization of Fifth Third Bank ( 08/18/13 )

Full Name (Last, First, Middle Initial)

**B. Fifth Third Bank**

Mailing Address 5925 Illinois Road

City Fort Wayne      State IN      Zip Code 46804-1159

Purpose of Disbursement  
Credit card payment

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 18 / 2013
**Transaction ID : SB21B-4-296-e**

Amount of Each Disbursement this Period

1208.27

Full Name (Last, First, Middle Initial)

**C. Fifth Third Bank**

Mailing Address 5925 Illinois Road

City Fort Wayne      State IN      Zip Code 46804-1159

Purpose of Disbursement  
Credit card payment

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 14 / 2013
**Transaction ID : SB21B-4-297-e**

Amount of Each Disbursement this Period

54

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►
1262.27



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 25 OF 35

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**The Fund for American Exceptionalism**

Full Name (Last, First, Middle Initial)

**A. Speedway**

Mailing Address 401 Kentucky Avenue

City Indianapolis      State IN      Zip Code 46225-1123

Purpose of Disbursement  
Auto expense

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 14 / 2013
**Transaction ID : SB21B-322-47-V**

Amount of Each Disbursement this Period

127.33

**[MEMO ITEM]**

Subitemization of Fifth Third Bank ( 09/14/13 )

Full Name (Last, First, Middle Initial)

**B. McNamara Florists**

Mailing Address 3969 E 82nd Street

City Indianapolis      State IN      Zip Code 46240-2468

Purpose of Disbursement  
Gifts for volunteers

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 14 / 2013
**Transaction ID : SB21B-314-48-V**

Amount of Each Disbursement this Period

207.55

**[MEMO ITEM]**

Subitemization of Fifth Third Bank ( 09/14/13 )

Full Name (Last, First, Middle Initial)

**C. Fifth Third Bank**

Mailing Address 5925 Illinois Road

City Fort Wayne      State IN      Zip Code 46804-1159

Purpose of Disbursement  
Credit card payment

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 14 / 2013
**Transaction ID : SB21B-4-298-e**

Amount of Each Disbursement this Period

334.88

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

334.88

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

## The Fund for American Exceptionalism

### A. Mo's A Place for Steak

Diagram showing three different connector types: a 10-pin connector (labeled 10), an 11-pin connector (labeled 11), and a 2013-pin connector (labeled 2013).

Category/  
Type

288.85

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Subitemization of Fifth Third Bank ( 10/11/13 )

### B. McNamara Florists

Three digital displays showing the date 10/11/2013 in MM/DD/YYYY format. The first display shows '10' with 'M' indicators above it. The second display shows '11' with 'D' indicators above it. The third display shows '2013' with 'Y' indicators above it.

Category/  
Type

514.6

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Subitemization of Fifth Third Bank ( 10/11/13 )

### C. Speedway

Category/  
Type

85.01

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

### Subitemization of Fifth Third Bank ( 10/11/13 )

0.00

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

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

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

## The Fund for American Exceptionalism

### A. Fifth Third Bank

Diagram showing three different connector types: a 10-pin connector (labeled 10), an 11-pin connector (labeled 11), and a 2013-pin connector (labeled 2013).

Category/  
Type

967.2

State:  District:

### B. Fifth Third Bank

Category/  
Type

178.9

State:  District:

### C. Delta Airlines

Category/  
Type

537.8

State:  District:

Subitemization of Fifth Third Bank ( 11/03/13 )

1146.10

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 28 OF 35

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**The Fund for American Exceptionalism**

Full Name (Last, First, Middle Initial)

**A. Fifth Third Bank**

Mailing Address 5925 Illinois Road

City Fort Wayne      State IN      Zip Code 46804-1159

Purpose of Disbursement  
Credit card payment

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 03 / 2013
**Transaction ID : SB21B-4-301-e**

Amount of Each Disbursement this Period

751.66

Full Name (Last, First, Middle Initial)

**B. McNamara Florists**

Mailing Address 3969 E 82nd Street

City Indianapolis      State IN      Zip Code 46240-2468

Purpose of Disbursement  
Gifts for volunteers

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 03 / 2013
**Transaction ID : SB21B-314-57-V**

Amount of Each Disbursement this Period

479.3

**[MEMO ITEM]**

Subitemization of Fifth Third Bank ( 11/03/13 )

Full Name (Last, First, Middle Initial)

**C. Speedway**

Mailing Address 401 Kentucky Avenue

City Indianapolis      State IN      Zip Code 46225-1123

Purpose of Disbursement  
Auto xpense

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 03 / 2013
**Transaction ID : SB21B-322-58-V**

Amount of Each Disbursement this Period

123.55

**[MEMO ITEM]**

Subitemization of Fifth Third Bank ( 11/03/13 )

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

751.66

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 29 OF 35

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**The Fund for American Exceptionalism**

Full Name (Last, First, Middle Initial)

**A. Eagle Creek Aviation Services**

Mailing Address 4101 Dandy Trail

City Indianapolis      State IN      Zip Code 46254-9200

Purpose of Disbursement  
Air travel for fundraiser

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 03 / 2013
**Transaction ID : SB21B-394-63-V**

Amount of Each Disbursement this Period

312.68

**[MEMO ITEM]**

Subitemization of Fifth Third Bank ( 11/03/13 )

Full Name (Last, First, Middle Initial)

**B. Fifth Third Bank**

Mailing Address 5925 Illinois Road

City Fort Wayne      State IN      Zip Code 46804-1159

Purpose of Disbursement  
Credit card payment

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 03 / 2013
**Transaction ID : SB21B-4-302-e**

Amount of Each Disbursement this Period

1021.14

Full Name (Last, First, Middle Initial)

**C. Speedway**

Mailing Address 401 Kentucky Avenue

City Indianapolis      State IN      Zip Code 46225-1123

Purpose of Disbursement  
Auto expense

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 30 / 2013
**Transaction ID : SB21B-322-64-V**

Amount of Each Disbursement this Period

253.55

**[MEMO ITEM]**

Subitemization of Fifth Third Bank ( 11/30/13 )

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

1021.14

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 30 OF 35

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**The Fund for American Exceptionalism**

Full Name (Last, First, Middle Initial)

**A. McNamara Florists**

Mailing Address 3969 E 82nd Street

City Indianapolis      State IN      Zip Code 46240-2468

Purpose of Disbursement  
Gifts for volunteers

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 30 / 2013
**Transaction ID : SB21B-314-65-V**

Amount of Each Disbursement this Period

218.25

**[MEMO ITEM]**

Subitemization of Fifth Third Bank ( 11/30/13 )

Full Name (Last, First, Middle Initial)

**B. Eagle Creek Aviation Services**

Mailing Address 4101 Dandy Trail

City Indianapolis      State IN      Zip Code 46254-9200

Purpose of Disbursement  
Air travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 30 / 2013
**Transaction ID : SB21B-394-67-V**

Amount of Each Disbursement this Period

152.2

**[MEMO ITEM]**

Subitemization of Fifth Third Bank ( 11/30/13 )

Full Name (Last, First, Middle Initial)

**C. Fifth Third Bank**

Mailing Address 5925 Illinois Road

City Fort Wayne      State IN      Zip Code 46804-1159

Purpose of Disbursement  
Credit card payment

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 30 / 2013
**Transaction ID : SB21B-4-303-e**

Amount of Each Disbursement this Period

637.26

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

637.26

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

## The Fund for American Exceptionalism

Subitemization of Fifth Third Bank ( 12/11/13 )

352.53

200

[illegible]

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

## The Fund for American Exceptionalism

**A. Kelmscott Communications Inc**

Mailing Address 1665 Mallette Road

City	State	Zip Code
Aurora	IL	60505-1354

Purpose of Disbursement
Mailing cost for fundraiser

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Three date pickers are shown, each with a label above it: 'MM', 'DD', and 'YYYY'. The first picker shows '12', the second shows '22', and the third shows '2013'. The pickers are arranged horizontally and separated by slashes, representing the MM/DD/YYYY format.

Transaction ID : SB21B-378-319-e

Amount of Each Disbursement this Period

1483.34

Full Name (Last, First, Middle Initial)

### B. Lisa Wagner & Co

Mailing Address PO Box 446

City	State	Zip Code
Batavia	IL	60510-0446

Purpose of Disbursement
Fundraising consulting

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B-377-318-e

Amount of Each Disbursement this Period

2500

Full Name (Last, First, Middle Initial)

### C. Ron Gould Studios

Mailing Address 1401 W Huron Street

City	State	Zip Code
Chicago	IL	60642-8705

Purpose of Disbursement	Photography at fundraiser
-------------------------	---------------------------

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B-375-315-e

Amount of Each Disbursement this Period

625

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

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

4608.34

14812.48



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 33 OF 35

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

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NAME OF COMMITTEE (In Full)

**The Fund for American Exceptionalism**

Full Name (Last, First, Middle Initial)

**A. Byrne for Congress**

Mailing Address 10 Court Square

City	State	Zip Code
Montgomery	AL	36104-3701

Purpose of Disbursement  
Political contribution

Candidate Name

**Bradley Byrne**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2013

**Transaction ID : SB23-371-313-e**

Amount of Each Disbursement this Period

2000
------

Full Name (Last, First, Middle Initial)

**B. Coffman For Congress 2012**Mailing Address 9249 S Broadway  
# 200-501

City	State	Zip Code
Highlands Ranch	CO	80129-5690

Purpose of Disbursement  
Political contribution

Candidate Name

**Michael Coffman**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State: CO

District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		24		2013

**Transaction ID : SB23-190-321-e**

Amount of Each Disbursement this Period

1000
------

Full Name (Last, First, Middle Initial)

**C. Dold for Congress**

Mailing Address 3330 Skokie Valley Road

City	State	Zip Code
Highland Park	IL	60035-1035

Purpose of Disbursement  
Political contribution

Candidate Name

**Robert James Mr Dold Jr.**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL

District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		29		2013

**Transaction ID : SB23-68-323-e**

Amount of Each Disbursement this Period

5000
------

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

8000.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 34 OF 35

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

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)

**The Fund for American Exceptionalism**

Full Name (Last, First, Middle Initial)

**A. Handel for Senate Inc**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2013

Mailing Address 412 S Capitol Street SE  
Apt. B

City Washington State DC Zip Code 20003-4066

Purpose of Disbursement  
Political contribution

011

**Transaction ID : SB23-379-320-e**

Amount of Each Disbursement this Period

2500
------

Candidate Name

**Karen Handel**Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. Neil Riser Campaign Inc**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2013

Mailing Address PO Box 1376

City West Monroe State LA Zip Code 71294-1376

Purpose of Disbursement  
Political contribution

011

**Transaction ID : SB23-373-314-e**

Amount of Each Disbursement this Period

2000
------

Candidate Name

**Neil Riser**Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Amount of Each Disbursement this Period

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

4500.00

12500.00

