

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Ice Miller PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		60997.79
(b) Cash on Hand at Beginning of Reporting Period.....	64886.79	
(c) Total Receipts (from Line 19)	7385.99	84674.99
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	72272.78	145672.78
7. Total Disbursements (from Line 31).....	5000.00	78400.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	67272.78	67272.78
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	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Ice Miller PAC

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

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).....	7385.99	73241.55
(ii) Unitemized	0.00	10933.44
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	7385.99	84174.99
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	7385.99	84174.99
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	500.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	7385.99	84674.99
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	7385.99	84674.99

DETAILED SUMMARY PAGE

of Disbursements

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	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	78400.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	5000.00	78400.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5000.00	78400.00

DETAILED SUMMARY PAGE
of Disbursements

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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)	7385.99	84174.99
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7385.99	84174.99
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

**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 48
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Ice Miller PAC

A. Aaron, Anthony, , Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address One American Square
Suite 2900

City Indianapolis State IN Zip Code 46282-0200

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

Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.04

Date of Receipt
12 / 31 / 2016
Transaction ID : SA11AI.7504

Amount of Each Receipt this Period
41.67

Memo Item
\$41.67 monthly: 12/7/16

B. Adams III, Wayne, O., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address One American Square
Suite 2900

City Indianapolis State IN Zip Code 46282-0200

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

Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.08

Date of Receipt
12 / 31 / 2016
Transaction ID : SA11AI.7505

Amount of Each Receipt this Period
83.34

Memo Item
\$83.34 monthly: 12/7/16

C. Agin, Bruce, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 W. Madison Street
Suite 3500

City Chicago State IL Zip Code 60606

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

Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.08

Date of Receipt
12 / 31 / 2016
Transaction ID : SA11AI.7506

Amount of Each Receipt this Period
83.34

Memo Item
\$83.34 monthly: 12/7/16

SUBTOTAL of Receipts This Page (optional).....	208.35
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 7 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Ice Miller PAC

A. Alerding, Kevin, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282-0200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 504.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7507
 Amount of Each Receipt this Period 42.00
 Memo Item
 \$42.00 monthly: 12/7/16

B. Arceneaux, Adam, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282-0200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.08

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7509
 Amount of Each Receipt this Period 83.34
 Memo Item
 \$83.34 monthly: 12/7/16

C. Arndt, Randall, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 250 West Street
 City Columbus State OH Zip Code 43215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7510
 Amount of Each Receipt this Period 41.67
 Memo Item
 \$41.67 monthly: 12/7/16

SUBTOTAL of Receipts This Page (optional).....	167.01
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 8 OF 48
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Ice Miller PAC

A. Babbitt, Robin, , Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address One American Square
Suite 2900

City Indianapolis State IN Zip Code 46282

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

Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.08

Date of Receipt
12 / 31 / 2016
Transaction ID : SA11AI.7511

Amount of Each Receipt this Period
83.34

Memo Item
\$83.34 monthly: 12/7/16

B. Banta, Holiday, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address One American Square
Suite 2900

City Indianapolis State IN Zip Code 46282-0200

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

Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.08

Date of Receipt
12 / 31 / 2016
Transaction ID : SA11AI.7512

Amount of Each Receipt this Period
20.84

Memo Item
\$20.84 monthly: 12/7/16

C. Barath, William, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 250 West Street

City Columbus State OH Zip Code 43215

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

Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.04

Date of Receipt
12 / 31 / 2016
Transaction ID : SA11AI.7513

Amount of Each Receipt this Period
41.67

Memo Item
\$41.67 monthly: 12/7/16

SUBTOTAL of Receipts This Page (optional).....	145.85
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 OF 48
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Ice Miller PAC

A. Bayt, Phillip, L.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282-0200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1020.00**

Date of Receipt **12 / 31 / 2016**
Transaction ID : SA11AI.7514
 Amount of Each Receipt this Period **85.00**
 Memo Item
 \$85.00 monthly: 12/7/16

B. Bittner, Paul, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 250 West Street
 City Columbus State OH Zip Code 43215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.08**

Date of Receipt **12 / 31 / 2016**
Transaction ID : SA11AI.7515
 Amount of Each Receipt this Period **83.34**
 Memo Item
 \$83.34 monthly: 12/7/16

C. Blickman, Michael, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282-0200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.08**

Date of Receipt **12 / 31 / 2016**
Transaction ID : SA11AI.7516
 Amount of Each Receipt this Period **83.34**
 Memo Item
 \$83.34 monthly: 12/7/16

SUBTOTAL of Receipts This Page (optional).....	251.68
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 10 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Ice Miller PAC

A. Bouaichi, Kristine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282-0200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7517
 Amount of Each Receipt this Period 41.67
 Memo Item
 \$41.67 monthly: 12/7/16

B. Braitman, Mary Beth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282-0200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.08

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7519
 Amount of Each Receipt this Period 83.34
 Memo Item
 \$83.34 monthly: 12/7/16

C. Brown, Jenifer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282-0200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7520
 Amount of Each Receipt this Period 41.67
 Memo Item
 \$41.67 monthly: 12/7/16

SUBTOTAL of Receipts This Page (optional).....	166.68
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Ice Miller PAC

A. Burke, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 W. Madison Street
 Suite 3500
 City Chicago State IL Zip Code 60606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.08

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7521
 Amount of Each Receipt this Period 83.34
 Memo Item
 \$83.34 monthly: 12/7/16

B. Calisoff, Adam, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 West Madison
 Suite 3500
 City Chicago State IL Zip Code 60606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.08

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7522
 Amount of Each Receipt this Period 83.34
 Memo Item
 \$83.34 monthly: 12/7/16

C. Capen, Timothy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282-0200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.08

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7611
 Amount of Each Receipt this Period 31.26
 Memo Item
 \$10.42 twice monthly: 11/30; 12/16; 12/31/16

SUBTOTAL of Receipts This Page (optional).....	197.94
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 OF 48
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Ice Miller PAC

A. Corsaro, Paul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.16

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.7613
 Amount of Each Receipt this Period 62.52
 Memo Item
 \$20.84 twice monthly: 11/30; 12/16; 12/31/16

B. Cracraft, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282-0200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.16

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.7614
 Amount of Each Receipt this Period 62.52
 Memo Item
 \$20.84 twice monthly: 11/30; 12/16; 12/31/16

C. Crist, Brian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282-0200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.08

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.7526
 Amount of Each Receipt this Period 83.34
 Memo Item
 \$83.34 monthly: 12/7/16

SUBTOTAL of Receipts This Page (optional).....	208.38
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Ice Miller PAC

A. Crist, Tyson, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 250 West Street
 City Columbus State OH Zip Code 43215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.08

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7615
 Amount of Each Receipt this Period 31.26
 Memo Item
 \$10.42 twice monthly: 11/30; 12/16; 12/31/16

B. Crognale, Corey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 250 West Street
 City Columbus State OH Zip Code 63215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7616
 Amount of Each Receipt this Period 30.00
 Memo Item
 \$10.00 twice monthly: 11/30; 12/16; 12/31/16

C. Czajka, Terri, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square Suite 2900
 City Indianapolis State IN Zip Code 46282-0200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.08

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7527
 Amount of Each Receipt this Period 83.34
 Memo Item
 \$83.34 monthly: 12/7/16

SUBTOTAL of Receipts This Page (optional).....	144.60
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 15 OF 48
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Ice Miller PAC

A. Dack, Jeffrey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address One American Square
Suite 2900

City Indianapolis State IN Zip Code 46282-0200

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

Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016

Transaction ID : SA11AI.7529

Amount of Each Receipt this Period
20.00

Memo Item
 \$20.00 monthly: 12/7/16

B. Dankert, Gary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address One American Square
Suite 2900

City Indianapolis State IN Zip Code 46282-0200

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

Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.08

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016

Transaction ID : SA11AI.7530

Amount of Each Receipt this Period
83.34

Memo Item
 \$83.34 monthly: 12/7/16

C. Danz, Kristine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address One American Square
Suite 2900

City Indianapolis State IN Zip Code 46282-0200

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

Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.04

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016

Transaction ID : SA11AI.7523

Amount of Each Receipt this Period
41.67

Memo Item
 \$41.67 monthly: 12/7/16

SUBTOTAL of Receipts This Page (optional).....	145.01
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 16 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Ice Miller PAC

A. Davidson, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 250 West Street
 City Columbus State OH Zip Code 43215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.08

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7531
 Amount of Each Receipt this Period 83.34
 Memo Item
 \$83.34 monthly: 12/7/16

B. DeLaruelle, Matthew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square Suite 2900
 City Indianapolis State IN Zip Code 46282-0200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.08

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7532
 Amount of Each Receipt this Period 20.84
 Memo Item
 \$20.84 monthly: 12/7/16

C. Devine, Patrick, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 250 West Street
 City Columbus State OH Zip Code 43215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 208.40

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7617
 Amount of Each Receipt this Period 31.26
 Memo Item
 \$10.42 twice monthly: 11/30; 12/16; 12/31/16

SUBTOTAL of Receipts This Page (optional).....	135.44
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 48
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Ice Miller PAC

A. Dimond, Thomas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 W. Madison Street
 Suite 3500
 City Chicago State IL Zip Code 60606-3417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.16

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.7618
 Amount of Each Receipt this Period
 62.52
 Memo Item
 \$20.84 twice monthly: 11/30; 12/16; 12/31/16

B. Dixon, Aaron, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282-0200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.08

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.7533
 Amount of Each Receipt this Period
 83.34
 Memo Item
 \$83.34 monthly: 12/7/16

C. Dunn, Gregory, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 250 West Street
 City Columbus State OH Zip Code 43215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.7534
 Amount of Each Receipt this Period
 41.67
 Memo Item
 \$41.67 monthly: 12/7/16

SUBTOTAL of Receipts This Page (optional).....	187.53
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 18 OF 48
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Ice Miller PAC

A. Earnhart, Tamatha, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282-0200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7535
 Amount of Each Receipt this Period 41.67
 Memo Item
 \$41.67 monthly: 12/7/16

B. Efroymson, Henry, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282-0200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.08

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7536
 Amount of Each Receipt this Period 83.34
 Memo Item
 \$83.34 monthly: 12/7/16

C. Fisher, Amy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7537
 Amount of Each Receipt this Period 25.00
 Memo Item
 \$25.00 monthly: 12/7/16

SUBTOTAL of Receipts This Page (optional).....	150.01
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 19 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Ice Miller PAC

A. Ford, Mark, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282-0200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.08

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7538
 Amount of Each Receipt this Period 83.34
 Memo Item
 \$83.34 monthly: 12/7/16

B. Fornshell, Matthew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 250 West Street
 City Columbus State OH Zip Code 43215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7539
 Amount of Each Receipt this Period 41.67
 Memo Item
 \$41.67 monthly: 12/7/16

C. Forry, Steven, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 250 West Street
 City Columbus State OH Zip Code 43215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.08

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7619
 Amount of Each Receipt this Period 31.26
 Memo Item
 \$10.42 twice monthly: 11/30; 12/16; 12/31/16

SUBTOTAL of Receipts This Page (optional).....	156.27
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 20 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Ice Miller PAC

A. Funke, Sarah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282-0200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.08

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7540
 Amount of Each Receipt this Period 83.34
 Memo Item
 \$83.34 monthly: 12/7/16

B. Gasper, George, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282-0200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.08

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7541
 Amount of Each Receipt this Period 20.84
 Memo Item
 \$20.84 monthly: 12/7/16

C. Gauss, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282-0200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7542
 Amount of Each Receipt this Period 75.00
 Memo Item
 \$75.00 monthly: 12/7/16

SUBTOTAL of Receipts This Page (optional).....	179.18
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 21 OF 48
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Ice Miller PAC

A. Genetos, Philip, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282-0200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 999.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.7543
 Amount of Each Receipt this Period
 83.33
 Memo Item
 \$83.33 monthly: 12/7/16

B. Geswein, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Arena District, 250 West Street
 Suite 700
 City Columbus State OH Zip Code 43215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.16

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.7620
 Amount of Each Receipt this Period
 62.52
 Memo Item
 \$20.84 twice monthly: 11/30; 12/16; 12/31/16

C. Gilcrest, Roger, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 250 West Street
 City Columbus State IN Zip Code 46282-0200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.08

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.7621
 Amount of Each Receipt this Period
 31.26
 Memo Item
 \$10.42 twice monthly: 11/30; 12/16; 12/31/16

SUBTOTAL of Receipts This Page (optional).....	177.11
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 48
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Ice Miller PAC

A. Gilligan, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 250 West Street
 City Columbus State OH Zip Code 43215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7544
 Amount of Each Receipt this Period 41.67
 Memo Item
 \$41.67 monthly: 12/7/16

B. Glier, Christl, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square Suite 2900
 City Indianapolis State IN Zip Code 46282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 499.92

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7622
 Amount of Each Receipt this Period 62.49
 Memo Item
 \$20.83 twice monthly: 11/30; 12/16; 12/31/16

C. Gonso, Harry, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square Suite 2900
 City Indianapolis State IN Zip Code 46282-0200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.08

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7545
 Amount of Each Receipt this Period 83.34
 Memo Item
 \$83.34 monthly: 12/7/16

SUBTOTAL of Receipts This Page (optional).....▶	187.50
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 23 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Ice Miller PAC

A. Grayem, Jeremy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 250 West Street
 City Columbus State OH Zip Code 43215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.08

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7623
 Amount of Each Receipt this Period 31.26
 Memo Item
 \$10.42 twice monthly: 11/30; 12/16; 12/31/16

B. Hammond, John, R., , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square Suite 2900
 City Indianapolis State IN Zip Code 46282-0200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.08

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7546
 Amount of Each Receipt this Period 83.34
 Memo Item
 \$83.34 monthly: 12/7/16

C. Harris, Melanie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square Suite 2900
 City Indianapolis State IN Zip Code 46282-0200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7547
 Amount of Each Receipt this Period 41.67
 Memo Item
 \$41.67 monthly: 12/7/16

SUBTOTAL of Receipts This Page (optional).....▶	156.27
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 24 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Ice Miller PAC

A. Heil, Clayton, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 F Street N.W.
 Suite 850
 City Washington State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller Strategies LLC Occupation (for Individual) Principal
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 999.96

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7548
 Amount of Each Receipt this Period 83.33
 Memo Item
 \$83.33 monthly: 12/7/16

B. Herndon, Jane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282-0200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.08

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7549
 Amount of Each Receipt this Period 83.34
 Memo Item
 \$83.34 monthly: 12/7/16

C. Hight, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2300 Cabot Drive
 Suite 455
 City Lisle State IL Zip Code 60532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7551
 Amount of Each Receipt this Period 41.67
 Memo Item
 \$41.67 monthly: 12/7/16

SUBTOTAL of Receipts This Page (optional).....	208.34
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 25 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Ice Miller PAC

A. Holz, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 250 West Street
 City Columbus State OH Zip Code 43215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7552
 Amount of Each Receipt this Period 41.67
 Memo Item
 \$41.67 monthly: 12/7/16

B. Hopwood, Mitchell, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square Suite 2900
 City Indianapolis State IN Zip Code 46282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Chief Operating Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.13

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7609
 Amount of Each Receipt this Period 62.52
 Memo Item
 \$20.84 twice monthly: 11/30; 12/16; 12/31/16

C. Humke, Steven, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square Suite 2900
 City Indianapolis State IN Zip Code 46282-0200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7553
 Amount of Each Receipt this Period 125.00
 Memo Item
 \$125.00 monthly: 12/7/16

SUBTOTAL of Receipts This Page (optional).....	229.19
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 26 OF 48
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Ice Miller PAC

A. John, Thomas, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.7554
 Amount of Each Receipt this Period
 41.67
 Memo Item
 \$41.67 monthly: 12/7/16

B. Jones, Steven, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282-0200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.7624
 Amount of Each Receipt this Period
 30.00
 Memo Item
 \$10.00 twice monthly: 11/30; 12/16; 12/31/16

C. Jordan, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 250 West Street
 City Columbus State OH Zip Code 43215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.7555
 Amount of Each Receipt this Period
 41.67
 Memo Item
 \$41.67 monthly: 12/7/16

SUBTOTAL of Receipts This Page (optional).....	113.34
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 27 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Ice Miller PAC

A. Kalachnik, Tyler, , Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address One American Square
Suite 2900

City Indianapolis State IN Zip Code 46282

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

Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
229.24

Date of Receipt
12 / 31 / 2016
Transaction ID : SA11AI.7556

Amount of Each Receipt this Period
20.84

Memo Item
\$20.84 monthly: 12/7/16

B. Keglweitsch, Josef, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 250 West Street

City Columbus State OH Zip Code 43215

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

Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.08

Date of Receipt
12 / 31 / 2016
Transaction ID : SA11AI.7557

Amount of Each Receipt this Period
20.84

Memo Item
\$20.84 monthly: 12/7/16

C. Knight, Kevin, R., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address One American Square
Suite 2900

City Indianapolis State IN Zip Code 46282-0200

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

Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.08

Date of Receipt
12 / 31 / 2016
Transaction ID : SA11AI.7558

Amount of Each Receipt this Period
83.34

Memo Item
\$83.34 monthly: 12/7/16

SUBTOTAL of Receipts This Page (optional).....▶ 125.02

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 28 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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)
Ice Miller PAC

A. Krahulik, Angela, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address One American Square
Suite 2900

City Indianapolis State IN Zip Code 46282-0200

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

Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.08

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7559

Amount of Each Receipt this Period 20.84

Memo Item
 \$20.84 monthly: 12/7/16

B. Krohne, Steven, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address One American Square
Suite 2900

City Indianapolis State IN Zip Code 46282

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

Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 999.96

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7560

Amount of Each Receipt this Period 83.33

Memo Item
 \$83.33 monthly: 12/7/16

C. Larimore, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address One American Square
Suite 3100

City Indianapolis State IN Zip Code 46282

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

Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney-at-Law

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 1000.08

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7561

Amount of Each Receipt this Period 83.34

Memo Item
 \$83.34 monthly: 12/7/16

SUBTOTAL of Receipts This Page (optional).....	187.51
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 29 OF 48
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Ice Miller PAC

A. Lee, Lisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.04**

Date of Receipt **12 / 31 / 2016**
Transaction ID : SA11AI.7562
 Amount of Each Receipt this Period **41.67**
 Memo Item
 \$41.67 monthly: 12/7/16

B. Leffelman, Dean, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2300 Cabot Drive
 Suite 455
 City Lisle State IL Zip Code 60532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **999.96**

Date of Receipt **12 / 31 / 2016**
Transaction ID : SA11AI.7563
 Amount of Each Receipt this Period **83.33**
 Memo Item
 \$83.33 monthly: 12/7/16

C. LeVere, T. Earl, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 250 West Street
 City Columbus State OH Zip Code 43215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.08**

Date of Receipt **12 / 31 / 2016**
Transaction ID : SA11AI.7625
 Amount of Each Receipt this Period **31.26**
 Memo Item
 \$10.42 twice monthly: 11/30; 12/16; 12/31/16

SUBTOTAL of Receipts This Page (optional).....	156.26
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 30 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Ice Miller PAC

A. Lewis, Jeffrey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.08

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7564
 Amount of Each Receipt this Period 83.34
 Memo Item
 \$83.34 monthly: 12/7/16

B. Lin, Albert, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 250 West Street
 City Columbus State OH Zip Code 43215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.08

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7626
 Amount of Each Receipt this Period 125.01
 Memo Item
 \$41.67 twice monthly: 11/30; 12/16; 12/31/16

C. McKiernan, Philip, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282-0200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 499.92

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7627
 Amount of Each Receipt this Period 62.49
 Memo Item
 \$20.83 twice monthly: 11/30; 12/16; 12/31/16

SUBTOTAL of Receipts This Page (optional).....	270.84
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 31 OF 48
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Ice Miller PAC

A. McNiel, Jason, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282-0200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 499.92

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7629
 Amount of Each Receipt this Period 62.49
 Memo Item
 \$20.83 twice monthly: 11/30; 12/16; 12/31/16

B. Melliere, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 250 West Street
 City Columbus State OH Zip Code 43215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7565
 Amount of Each Receipt this Period 100.00
 Memo Item
 \$100.00 monthly: 12/7/16

C. Metzger, Kimberly, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7566
 Amount of Each Receipt this Period 41.67
 Memo Item
 \$41.67 monthly: 12/7/16

SUBTOTAL of Receipts This Page (optional)..... ▶ 204.16
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 32 OF 48
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Ice Miller PAC

A. Miller, Christopher, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 250 West Street
 City Columbus State OH Zip Code 43215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.16

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7630
 Amount of Each Receipt this Period 62.52
 Memo Item
 \$20.84 twice monthly: 11/30; 12/16; 12/31/16

B. Millikan, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square Suite 2900
 City Indianapolis State IN Zip Code 46282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7568
 Amount of Each Receipt this Period 41.67
 Memo Item
 \$41.67 monthly: 12/7/16

C. Miroff, Andrew, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square Suite 2900
 City Indianapolis State IN Zip Code 46282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7569
 Amount of Each Receipt this Period 41.67
 Memo Item
 \$41.67 monthly: 12/7/16

SUBTOTAL of Receipts This Page (optional).....▶	145.86
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 33 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Ice Miller PAC

A. Myers, Byron, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.08

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7570
 Amount of Each Receipt this Period 20.84
 Memo Item
 \$20.84 monthly: 12/7/16

B. Nimmo, Anthony, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 West Madison Street
 Suite 3500
 City Chicago State IL Zip Code 60606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.08

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7571
 Amount of Each Receipt this Period 83.34
 Memo Item
 \$83.34 monthly: 12/7/16

C. Oberle, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 250 West Street
 City Columbus State OH Zip Code 43215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7573
 Amount of Each Receipt this Period 41.67
 Memo Item
 \$41.67 monthly: 12/7/16

SUBTOTAL of Receipts This Page (optional).....	145.85
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 34 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Ice Miller PAC

A. Ochs, Timothy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7574
 Amount of Each Receipt this Period 41.67
 Memo Item
 \$41.67 monthly: 12/7/16

B. Okenfuss, Judith, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.08

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7575
 Amount of Each Receipt this Period 83.34
 Memo Item
 \$83.34 monthly: 12/7/16

C. Ouellette, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 250 West Street
 City Columbus State OH Zip Code 43215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.08

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7576
 Amount of Each Receipt this Period 83.34
 Memo Item
 \$83.34 monthly: 12/7/16

SUBTOTAL of Receipts This Page (optional).....	208.35
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 35 OF 48
Use separate schedule(s) for each category of the Detailed Summary Page
FOR LINE NUMBER: (check only one)
11a 11b 11c 12
13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Ice Miller PAC

A. Pampush, Tom, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 250 West Street
City Columbus State OH Zip Code 43215
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 250.08

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7631
Amount of Each Receipt this Period 31.26
Memo Item
\$10.42 twice monthly: 11/30; 12/16; 12/31/16

B. Pashos, Kay, E., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address One American Square Suite 2900
City Indianapolis State IN Zip Code 46282-0200
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 499.92

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7632
Amount of Each Receipt this Period 62.49
Memo Item
\$20.83 twice monthly: 11/30; 12/16; 12/31/16

C. Ponder, Todd, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address One American Square Suite 2900
City Indianapolis State IN Zip Code 46282
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 500.04

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7577
Amount of Each Receipt this Period 41.67
Memo Item
\$41.67 monthly: 12/7/16

SUBTOTAL of Receipts This Page (optional)..... 135.42
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 36 OF 48
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Ice Miller PAC

A. Poor, Ryan, McCabe, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **375.03**

Date of Receipt **12 / 31 / 2016**
Transaction ID : SA11AI.7578
 Amount of Each Receipt this Period **41.67**
 Memo Item
 \$41.67 monthly: 12/7/16

B. Powers, Victoria, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 250 West Street
 City Columbus State OH Zip Code 43215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **750.00**

Date of Receipt **12 / 31 / 2016**
Transaction ID : SA11AI.7580
 Amount of Each Receipt this Period **62.50**
 Memo Item
 \$62.50 monthly: 12/7/16

C. Pryce, Deborah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 250 West Street
 City Columbus State OH Zip Code 43215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.16**

Date of Receipt **12 / 31 / 2016**
Transaction ID : SA11AI.7610
 Amount of Each Receipt this Period **62.52**
 Memo Item
 \$20.84 twice monthly: 11/30; 12/16; 12/31/16

SUBTOTAL of Receipts This Page (optional).....	166.69
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 37 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Ice Miller PAC

A. Pyatt, April, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7581
 Amount of Each Receipt this Period 41.67
 Memo Item
 \$41.67 monthly: 12/7/16

B. Richards, Mark, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282-0200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.08

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7582
 Amount of Each Receipt this Period 83.34
 Memo Item
 \$83.34 monthly: 12/7/16

C. Robinett, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 250 West Street
 City Columbus State OH Zip Code 43215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.08

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7633
 Amount of Each Receipt this Period 31.26
 Memo Item
 \$10.42 twice monthly: 11/30; 12/16; 12/31/16

SUBTOTAL of Receipts This Page (optional).....	156.27
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 38 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Ice Miller PAC

A. Scaletta, Phillip, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.08

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7583
 Amount of Each Receipt this Period 83.34
 Memo Item
 \$83.34 monthly: 12/7/16

B. Schillerstrom, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2300 Cabot Drive
 Suite 455
 City Lisle State IL Zip Code 60532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7584
 Amount of Each Receipt this Period 41.67
 Memo Item
 \$41.67 monthly: 12/7/16

C. Schnellenberger, Thomas, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.08

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7585
 Amount of Each Receipt this Period 83.34
 Memo Item
 \$83.34 monthly: 12/7/16

SUBTOTAL of Receipts This Page (optional).....	208.35
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 39 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Ice Miller PAC

A. Sciscoe, Marc, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.08

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7586
 Amount of Each Receipt this Period 83.34
 Memo Item
 \$83.34 monthly: 12/7/16

B. Sciscoe, Tara, Lynn, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7587
 Amount of Each Receipt this Period 41.67
 Memo Item
 \$41.67 monthly: 12/7/16

C. Seamands, Rebecca, Jane, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.08

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7588
 Amount of Each Receipt this Period 83.34
 Memo Item
 \$83.34 monthly: 12/7/16

SUBTOTAL of Receipts This Page (optional).....	208.35
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 40 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Ice Miller PAC

A. Sears, Christopher, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7589
 Amount of Each Receipt this Period 41.67
 Memo Item
 \$41.67 monthly: 12/7/16

B. Selby, Myra, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.08

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7590
 Amount of Each Receipt this Period 20.84
 Memo Item
 \$20.84 monthly: 12/7/16

C. Shublak, Mark, I., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.08

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7591
 Amount of Each Receipt this Period 83.34
 Memo Item
 \$83.34 monthly: 12/7/16

SUBTOTAL of Receipts This Page (optional).....	145.85
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 41 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Ice Miller PAC

A. Singer, Eric, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square Suite 2900
 City Indianapolis State IN Zip Code 46282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.08**

Date of Receipt **12 / 31 / 2016**
Transaction ID : SA11AI.7592
 Amount of Each Receipt this Period **20.84**
 Memo Item
 \$20.84 monthly: 12/7/16

B. Smikle, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square Suite 2900
 City Indianapolis State IN Zip Code 46282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1200.00**

Date of Receipt **12 / 31 / 2016**
Transaction ID : SA11AI.7593
 Amount of Each Receipt this Period **100.00**
 Memo Item
 \$100.00 monthly: 12/7/16

C. Snively, Scott, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square Suite 2900
 City Indianapolis State IN Zip Code 46282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **200.04**

Date of Receipt **12 / 31 / 2016**
Transaction ID : SA11AI.7594
 Amount of Each Receipt this Period **16.67**
 Memo Item
 \$16.67 monthly: 12/7/16

SUBTOTAL of Receipts This Page (optional).....	137.51
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 42 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Ice Miller PAC

A. Snyder, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2300 Cabot Drive
 Suite 455
 City Lisle State IL Zip Code 60532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.08

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.7595
 Amount of Each Receipt this Period
 83.34
 Memo Item
 \$83.34 monthly: 12/7/16

B. Springer, Marilee, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.08

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.7596
 Amount of Each Receipt this Period
 83.34
 Memo Item
 \$83.34 monthly: 12/7/16

C. Stackhouse, Dale, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.08

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.7597
 Amount of Each Receipt this Period
 83.34
 Memo Item
 \$83.34 monthly: 12/7/16

SUBTOTAL of Receipts This Page (optional).....	250.02
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 43 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Ice Miller PAC

A. Starkhoff, Alan, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 250 West Street

City Columbus	State OH	Zip Code 43215
------------------	-------------	-------------------

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

Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2016

Transaction ID : SA11AI.7598

Amount of Each Receipt this Period
83.34

Memo Item
\$83.34 monthly: 12/7/16

B. Swetnam, Daniel, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 250 West Street

City Columbus	State OH	Zip Code 43215
------------------	-------------	-------------------

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

Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2016

Transaction ID : SA11AI.7599

Amount of Each Receipt this Period
41.67

Memo Item
\$41.67 monthly: 12/7/16

C. Thornburgh, John, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address One American Square
Suite 2900

City Indianapolis	State IN	Zip Code 46282
----------------------	-------------	-------------------

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

Name of Employer (for Individual) Ice Miller LLP	Occupation (for Individual) Attorney
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2016

Transaction ID : SA11AI.7600

Amount of Each Receipt this Period
83.34

Memo Item
\$83.34 monthly: 12/7/16

SUBTOTAL of Receipts This Page (optional).....	208.35
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 44 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Ice Miller PAC

A. Thrapp, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.08

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7602
 Amount of Each Receipt this Period 83.34
 Memo Item
 \$83.34 monthly: 12/7/16

B. Tooley, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.08

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7603
 Amount of Each Receipt this Period 83.34
 Memo Item
 \$83.34 monthly: 12/7/16

C. Tridico, Kristina, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 499.92

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7604
 Amount of Each Receipt this Period 41.66
 Memo Item
 \$41.66 monthly: 12/7/16

SUBTOTAL of Receipts This Page (optional).....▶ 208.34
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 45 OF 48
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Ice Miller PAC

A. Vento, Andrew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.7605
 Amount of Each Receipt this Period
 20.00
 Memo Item
 \$20.00 monthly: 12/7/16

B. Wade, Felix, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 250 West Street
 City Columbus State OH Zip Code 43215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.08

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.7606
 Amount of Each Receipt this Period
 83.34
 Memo Item
 \$83.34 monthly: 12/7/16

C. Wahlers, Kristopher, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Arena District, 250 West
 Suite 700
 City Columbus State OH Zip Code 46312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.7634
 Amount of Each Receipt this Period
 75.00
 Memo Item
 \$25.00 twice monthly: 11/30; 12/16; 12/31/16

SUBTOTAL of Receipts This Page (optional).....	178.34
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 46 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Ice Miller PAC

A. Washington, Stephen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 W. Madison Street
 Suite 3500
 City Chicago State IL Zip Code 60606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.08

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7635
 Amount of Each Receipt this Period 31.26
 Memo Item
 \$10.42 twice monthly: 11/30; 12/16; 12/31/16

B. Whistler, Philip, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.08

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7607
 Amount of Each Receipt this Period 83.34
 Memo Item
 \$83.34 monthly: 12/7/16

C. Winchester, Katherine, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One American Square
 Suite 2900
 City Indianapolis State IN Zip Code 46282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.7508
 Amount of Each Receipt this Period 41.67
 Memo Item
 \$41.67 monthly: 12/7/16

SUBTOTAL of Receipts This Page (optional).....	156.27
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 47 OF 48
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Ice Miller PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wukmer, Michael, , ,

Mailing Address One American Square
Suite 2900

City Indianapolis State IN Zip Code 46282

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

Name of Employer (for Individual) Ice Miller LLP Occupation (for Individual) Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2016

Transaction ID : SA11AI.7608

Amount of Each Receipt this Period
100.00

Memo Item
\$100.00 monthly: 12/7/16

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	7385.99

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)
Ice Miller PAC

A. TRUMP MAKE AMERICA GREAT AGAIN COMMITTEE

Full Name (Last, First, Middle Initial)
C/O RED CURVE SOLUTIONS
138 CONANT STREET, 2ND FLOOR

City: BEVERLY State: MA Zip Code: 01915

Purpose of Disbursement: contribution
Candidate Name: TRUMP MAKE AMERICA GREAT AGAIN COMMITTEE
Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 05 / 2016

FEC Identification Number: C 00618371
Transaction ID : SB23.7641
Amount of Each Disbursement this Period: 5000.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	5000.00