

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
GREG PENCE FOR CONGRESS

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

| | COLUMN A This Period | COLUMN B Election Cycle-to-Date |
|---|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans) | | |
| (a) Total Contributions (other than loans) (from Line 11(e)).... | 35304.28 | 59753.33 |
| (b) Total Contribution Refunds (from Line 20(d)) | 0.00 | 2000.00 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))..... | 35304.28 | 57753.33 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 84919.83 | 177841.51 |
| (b) Total Offsets to Operating Expenditures (from Line 14)..... | 831.98 | 2204.00 |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))..... | 84087.85 | 175637.51 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 200526.00 | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)..... | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)..... | 0.00 | |

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

GREG PENCE FOR CONGRESS

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

| I. RECEIPTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|---------------------------------------|--|
| 11. CONTRIBUTIONS (other than loans) FROM: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 6785.00 | 16885.00 |
| (ii) Unitemized | 25819.28 | 33668.33 |
| (iii) TOTAL of contributions from individuals | 32604.28 | 50553.33 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 2700.00 | 9200.00 |
| (d) The Candidate | 0.00 | 0.00 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)).. | 35304.28 | 59753.33 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | 0.00 | 9607.66 |
| 13. LOANS: | | |
| (a) Made or Guaranteed by the Candidate..... | 0.00 | 0.00 |
| (b) All Other Loans..... | 0.00 | 0.00 |
| (c) TOTAL LOANS (add Lines 13(a) and (b))..... | 0.00 | 0.00 |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | 831.98 | 2204.00 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.) | 5.47 | 5.47 |
| 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... | 36141.73 | 71570.46 |

DETAILED SUMMARY PAGE
of Disbursements

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES..... | 84919.83 | 177841.51 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate..... | 0.00 | 0.00 |
| (b) Of All Other Loans | 0.00 | 0.00 |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... | 0.00 | 0.00 |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 2000.00 |
| (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 20(a), (b), and (c))..... | 0.00 | 2000.00 |
| 21. OTHER DISBURSEMENTS | 0.00 | 0.00 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ► | 84919.83 | 179841.51 |

III. CASH SUMMARY

| | |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 249304.10 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | 36141.73 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 285445.83 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 84919.83 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 200526.00 |

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

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

FOR LINE NUMBER: PAGE 5 OF 34
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
GREG PENCE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Brauch, Paul, A, Mr,

Mailing Address PO Box 722

City Le Mars State IA Zip Code 51031

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

Name of Employer Retired Occupation Retired

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 11 / 2018

Transaction ID : SA11AI.43070

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Brinkman, Audrey, M, Mrs,

Mailing Address 219 Snetting Dr

City Thief River Falls State MN Zip Code 56701

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

Name of Employer Retired Occupation Retired

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
275.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 21 / 2018

Transaction ID : SA11AI.42837

Amount of Each Receipt this Period
125.00

Memo Item

C. Full Name (Last, First, Middle Initial)
De Jong, Peter, , Mr,

Mailing Address 100 Holland Gln

City Escondido State CA Zip Code 92026

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

Name of Employer Self-Employed Occupation Retired

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 21 / 2018

Transaction ID : SA11AI.42928

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1125.00

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

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

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

FOR LINE NUMBER: PAGE 6 OF 34
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
GREG PENCE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Dillon, Anne, T, Mrs.,

Mailing Address 7477 N Pennsylvania Street, 45

City Indianapolis State IN Zip Code 46240

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

Name of Employer Self-Employed Occupation Finance/Investments/Banking

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 13 / 2018

Transaction ID : SA11AI.43140

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Ford, Victoria, I, MS,

Mailing Address 4303 Forest Park Rd

City Jacksonville State FL Zip Code 32210

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

Name of Employer Retired Occupation Retired

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 12 / 2018

Transaction ID : SA11AI.42534

Amount of Each Receipt this Period
 500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Schaller, Roger, L, Mr,

Mailing Address 8210 Lakeshore Rd

City Burtchville State MI Zip Code 48059

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

Name of Employer Schaller Corp. Occupation MGT

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 27 / 2018

Transaction ID : SA11AI.42989

Amount of Each Receipt this Period
 500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 34
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
GREG PENCE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Steele, McDowell, , ,
Mailing Address 104 N Hilldale Rd
City Salina State KS Zip Code 67401
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: 2020
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 235.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 14 / 2018
Transaction ID : SA11AI.42387
Amount of Each Receipt this Period
35.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
Swanson, Dennis, D, Mr,
Mailing Address 112 Gerrish Ln
City New Canaan State CT Zip Code 06840
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: 2020
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 675.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 12 / 2018
Transaction ID : SA11AI.42694
Amount of Each Receipt this Period
675.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
Swigert, Henry, T, Mr,
Mailing Address 1425 SW 20th Ave Ste 104
City Portland State OR Zip Code 97201
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: 2020
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 12 / 2018
Transaction ID : SA11AI.42728
Amount of Each Receipt this Period
250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 960.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 8 OF 34
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
GREG PENCE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Weiser, Robert, A, Mr,

Mailing Address 107 Cobleskill Dr

City Rochester State NY Zip Code 14626

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

Name of Employer Retired Occupation Retired

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 21 / 2018

Transaction ID : SA11AI.42697

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Wiehr, Loretta, M, MS,

Mailing Address 202 Rainbow Dr # 10213

City Livingston State TX Zip Code 77399

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

Name of Employer Retired Occupation Retired

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1350.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 19 / 2018

Transaction ID : SA11AI.42800

Amount of Each Receipt this Period
1350.00

Memo Item

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

Mailing Address PO Box 512

City Kasilof State AK Zip Code 99610

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

Name of Employer Retired Occupation Retired

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 17 / 2018

Transaction ID : SA11AI.42462

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 2350.00

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

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

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

FOR LINE NUMBER: PAGE 9 OF 34
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
GREG PENCE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Wood, Willis, Vernon, Mr,
Mailing Address PO Box 512

City: Kasilof State: AK Zip Code: 99610

FEC ID number of contributing federal political committee: C

Name of Employer: Retired Occupation: Retired

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 350.00

Date of Receipt: 12 / 18 / 2018
Transaction ID : SA11AI.42389

Amount of Each Receipt this Period: 350.00

Memo Item

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

City: State: Zip Code:

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation:

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date:

Date of Receipt:

Amount of Each Receipt this Period:

Memo Item

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

City: State: Zip Code:

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation:

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date:

Date of Receipt:

Amount of Each Receipt this Period:

Memo Item

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

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

350.00

6785.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

| | | | |
|--------------------------------------|-------------------------------------|--|------------------------------------|
| FOR LINE NUMBER: (check only one) | | PAGE 10 OF 34 | |
| <input type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a | <input checked="" type="checkbox"/> 11c 13b | <input type="checkbox"/> 11d 14 |
| | | <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
GREG PENCE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AAR CORP. PAC

Mailing Address 1100 N. WOOD DALE ROAD

| | | |
|-------------------|-------------|-------------------|
| City WOOD DALE | State IL | Zip Code 60191 |
|-------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00625921

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 17 / 2018

Transaction ID : SA11C.43152

Amount of Each Receipt this Period
2700.00

Memo Item

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

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

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

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

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

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 2700.00 |
| TOTAL This Period (last page this line number only).....▶ | 2700.00 |

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

| | | | | |
|---|------------------------------------|-------------------------------------|-------------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 11 OF 34 | |
| | <input type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a | <input type="checkbox"/> 11c 13b | <input checked="" type="checkbox"/> 11d 14 |
| <input type="checkbox"/> 15 | | | | |

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NAME OF COMMITTEE (In Full)
GREG PENCE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NOVA List Company

Mailing Address 20130 Lakeview Center Plz
Ste 300

City Ashburn State VA Zip Code 20147

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
420.70

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 27 / 2018

Transaction ID : SA14.43130

Amount of Each Receipt this Period
420.70

Memo Item
List Rental Vendor Refund

B. Full Name (Last, First, Middle Initial)
Pence, Gregory, J., Mr.,

Mailing Address 482 S Mutz Dr

City Columbus State IN Zip Code 47201

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

Name of Employer Occupation
Pence Group Executive

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
411.28

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 28 / 2018

Transaction ID : SA14.42301

Amount of Each Receipt this Period
411.28

Memo Item
Reimbursement by Candidate for debit card charges:
see detail

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... ▶ | 831.98 |
| TOTAL This Period (last page this line number only)..... ▶ | 831.98 |

: 97 `A-G79 @C B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFH`G7 <98I @ `CF`-H9A-N5H-CB

Form/Schedule: SA14

Transaction ID : SA14.42301

This reimbursement is for new member orientation expenses that should not have been charged to the campaign. Listed below are expenses that were reported in the previous report: 11/13/18 DC Tax \$10.09, 11/14/18 American Airlines \$70.00, 11/15/18 UVC \$6.58, 11/15/18 UVC 8.47, 11/16/18 UVC \$14.68, 11/19/18 American Airlines \$70.00. I will also list the expenses that are included in this report but are unitemized: 11/27/18 VIP Cab \$11.63, 11/28/18 UVC \$16.49, 11/29/18 DC Taxi \$9.01, 11/30/18 Peets \$2.53, 11/30/18 UVC \$12.30, 11/30/18 DC Taxi 17.48.

Form/Schedule:

Transaction ID:

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

| | | | | | |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 13 OF 34 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
GREG PENCE FOR CONGRESS

| | | | | | |
|---|--|------------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) A. Accupay | | | Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2018 | | |
| Mailing Address 584 N Emerson Ave | | | FEC Identification Number C | | |
| City Greenwood | State IN | Zip Code 46143 | Amount of Each Disbursement this Period 2374.58 | | |
| Purpose of Disbursement Payroll Taxes | | Category/ Type | Transaction ID : SB17.43171 | | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

| | | | | | |
|---|--|------------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) B. Accupay | | | Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2018 | | |
| Mailing Address 584 N Emerson Ave | | | FEC Identification Number C | | |
| City Greenwood | State IN | Zip Code 46143 | Amount of Each Disbursement this Period 45.33 | | |
| Purpose of Disbursement Payroll Processing Fees | | Category/ Type | Transaction ID : SB17.43172 | | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

| | | | | | |
|---|--|------------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) C. Accupay | | | Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2018 | | |
| Mailing Address 584 N Emerson Ave | | | FEC Identification Number C | | |
| City Greenwood | State IN | Zip Code 46143 | Amount of Each Disbursement this Period 2374.52 | | |
| Purpose of Disbursement Payroll Taxes | | Category/ Type | Transaction ID : SB17.43253 | | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 4794.43 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 14 OF 34 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
GREG PENCE FOR CONGRESS

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Accupay | | Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2018 |
| Mailing Address 584 N Emerson Ave | | FEC Identification Number C |
| City Greenwood | State IN | Zip Code 46143 |
| Purpose of Disbursement Payroll Processing Fees | | Amount of Each Disbursement this Period 46.16 |
| Candidate Name | | Transaction ID : SB17.43254 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item |
| State: _____ | District: _____ | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Accupay | | Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2018 |
| Mailing Address 584 N Emerson Ave | | FEC Identification Number C |
| City Greenwood | State IN | Zip Code 46143 |
| Purpose of Disbursement Payroll Taxes | | Amount of Each Disbursement this Period 2790.92 |
| Candidate Name | | Transaction ID : SB17.43241 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item |
| State: _____ | District: _____ | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Accupay | | Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2018 |
| Mailing Address 584 N Emerson Ave | | FEC Identification Number C |
| City Greenwood | State IN | Zip Code 46143 |
| Purpose of Disbursement Payroll Processing Fees | | Amount of Each Disbursement this Period 45.74 |
| Candidate Name | | Transaction ID : SB17.43242 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item |
| State: _____ | District: _____ | |

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|--|---------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 2882.82 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | | |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 15 OF 34 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
GREG PENCE FOR CONGRESS

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. American Airlines | | Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2018 |
| Mailing Address PO Box 619612 | | FEC Identification Number C |
| City Dfw Airport | State TX | Zip Code 75261 |
| Purpose of Disbursement Airfare | Category/ Type | |
| Candidate Name | Amount of Each Disbursement this Period 30.00 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | Transaction ID : SB17.43186 <input type="checkbox"/> Memo Item | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. American Airlines | | Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2018 |
| Mailing Address PO Box 619612 | | FEC Identification Number C |
| City Dfw Airport | State TX | Zip Code 75261 |
| Purpose of Disbursement Airfare -New Member Orientation expense reimbursed by Greg Pence on 12/28/2018 | Category/ Type | |
| Candidate Name | Amount of Each Disbursement this Period 70.00 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | Transaction ID : SB17.43190 <input type="checkbox"/> Memo Item | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. American Airlines | | Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2018 |
| Mailing Address PO Box 619612 | | FEC Identification Number C |
| City Dfw Airport | State TX | Zip Code 75261 |
| Purpose of Disbursement Airfare | Category/ Type | |
| Candidate Name | Amount of Each Disbursement this Period 30.00 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | Transaction ID : SB17.43196 <input type="checkbox"/> Memo Item | |

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|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 130.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 16 OF 34 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
GREG PENCE FOR CONGRESS

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. American Airlines | | Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2018 |
| Mailing Address PO Box 619612 | | FEC Identification Number C |
| City Dfw Airport | State TX | Zip Code 75261 |
| Purpose of Disbursement Airfare | Category/ Type | |
| Candidate Name | Amount of Each Disbursement this Period 40.00 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | Transaction ID : SB17.43197 <input type="checkbox"/> Memo Item | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. American Airlines | | Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2018 |
| Mailing Address PO Box 619612 | | FEC Identification Number C |
| City Dfw Airport | State TX | Zip Code 75261 |
| Purpose of Disbursement Airfare | Category/ Type | |
| Candidate Name | Amount of Each Disbursement this Period 30.00 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | Transaction ID : SB17.43201 <input type="checkbox"/> Memo Item | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Brown, Hannah, E., Ms., | | Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2018 |
| Mailing Address 5736 Wattles Dr Apt F | | FEC Identification Number C |
| City Indianapolis | State IN | Zip Code 46224 |
| Purpose of Disbursement Payroll | Category/ Type | |
| Candidate Name | Amount of Each Disbursement this Period 2266.77 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | Transaction ID : SB17.43173 <input type="checkbox"/> Memo Item | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 2336.77 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 17 OF 34 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
GREG PENCE FOR CONGRESS

| | | | | |
|---|--|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) A. Brown, Hannah, E., Ms., | | | Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2018 | |
| Mailing Address 5736 Wattles Dr Apt F | | | FEC Identification Number C | |
| City Indianapolis | State IN | Zip Code 46224 | Amount of Each Disbursement this Period 2044.50 | |
| Purpose of Disbursement Payroll | | Category/ Type | Transaction ID : SB17.43261 | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

| | | | | |
|---|--|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) B. Brown, Hannah, E., Ms., | | | Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2018 | |
| Mailing Address 5736 Wattles Dr Apt F | | | FEC Identification Number C | |
| City Indianapolis | State IN | Zip Code 46224 | Amount of Each Disbursement this Period 2296.38 | |
| Purpose of Disbursement Payroll | | Category/ Type | Transaction ID : SB17.43243 | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

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|---|--|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) c. Capitol Hill Club | | | Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2018 | |
| Mailing Address 300 1st St SE | | | FEC Identification Number C | |
| City Washington | State DC | Zip Code 20003 | Amount of Each Disbursement this Period 46.00 | |
| Purpose of Disbursement Meals Expense-New Member Orientation expense reimbursed by Greg Pence on 12/28/2018 | | Category/ Type | Transaction ID : SB17.43189 | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 4386.88 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 18 OF 34 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
GREG PENCE FOR CONGRESS

| | | | | | |
|---|--|---|---|--|--|
| Full Name (Last, First, Middle Initial) A. Centra Credit Union | | | Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2018 | | |
| Mailing Address PO Box 789 | | | FEC Identification Number C | | |
| City Columbus | State IN | Zip Code 47202 | Amount of Each Disbursement this Period 443.82 | | |
| Purpose of Disbursement Campaign Van Payment - Pd by G. Pence | | Category/ Type | Transaction ID : SB17.43215 | | |
| Candidate Name | | <input checked="" type="checkbox"/> Memo Item | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

| | | | | | |
|---|--|------------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) B. Centra Credit Union | | | Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2018 | | |
| Mailing Address PO Box 789 | | | FEC Identification Number C | | |
| City Columbus | State IN | Zip Code 47202 | Amount of Each Disbursement this Period 443.82 | | |
| Purpose of Disbursement Campaign Van Payment | | Category/ Type | Transaction ID : SB17.43239 | | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|---|--|------------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) C. Clark Hill PLC | | | Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2018 | | |
| Mailing Address PO Box 3760 | | | FEC Identification Number C | | |
| City Pittsburgh | State PA | Zip Code 15230 | Amount of Each Disbursement this Period 2000.00 | | |
| Purpose of Disbursement Legal Fees | | Category/ Type | Transaction ID : SB17.43228 | | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 2443.82 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 19 OF 34 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
GREG PENCE FOR CONGRESS

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Comcast | | Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2018 |
| Mailing Address PO Box 3001 | | FEC Identification Number C |
| City Southeastern | State PA | Zip Code 19398 |
| Purpose of Disbursement Internet Expense | | Amount of Each Disbursement this Period 335.83 |
| Candidate Name | | Transaction ID : SB17.43166 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item |
| State: District: | | |

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|---|--|---|
| Full Name (Last, First, Middle Initial) B. Comcast | | Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2018 |
| Mailing Address PO Box 3001 | | FEC Identification Number C |
| City Southeastern | State PA | Zip Code 19398 |
| Purpose of Disbursement Internet Expense | | Amount of Each Disbursement this Period 135.85 |
| Candidate Name | | Transaction ID : SB17.43209 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item |
| State: District: | | |

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|---|--|---|
| Full Name (Last, First, Middle Initial) c. Courtyard Indianapolis | | Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2018 |
| Mailing Address 320 N Senate Ave | | FEC Identification Number C |
| City Indianapolis | State IN | Zip Code 46204 |
| Purpose of Disbursement Lodging Expense | | Amount of Each Disbursement this Period 387.68 |
| Candidate Name | | Transaction ID : SB17.43188 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 859.36 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 20 OF 34 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
GREG PENCE FOR CONGRESS

| | | | | |
|---|--|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) A. Dessauer, Elizabeth, , Ms., | | | Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2018 | |
| Mailing Address 7214 Shag Oak Dr | | | FEC Identification Number C | |
| City Noblesville | State IN | Zip Code 46062 | Amount of Each Disbursement this Period 1451.80 | |
| Purpose of Disbursement Payroll | | Category/ Type | Transaction ID : SB17.43174 | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

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|---|--|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) B. Dessauer, Elizabeth, , Ms., | | | Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2018 | |
| Mailing Address 7214 Shag Oak Dr | | | FEC Identification Number C | |
| City Noblesville | State IN | Zip Code 46062 | Amount of Each Disbursement this Period 1401.81 | |
| Purpose of Disbursement Payroll | | Category/ Type | Transaction ID : SB17.43262 | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

| | | | | |
|---|--|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) C. Dessauer, Elizabeth, , Ms., | | | Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2018 | |
| Mailing Address 7214 Shag Oak Dr | | | FEC Identification Number C | |
| City Noblesville | State IN | Zip Code 46062 | Amount of Each Disbursement this Period 1592.11 | |
| Purpose of Disbursement Payroll | | Category/ Type | Transaction ID : SB17.43244 | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 4445.72 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 21 OF 34 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
GREG PENCE FOR CONGRESS

| | | | | | |
|---|--|---|---|--|--|
| Full Name (Last, First, Middle Initial) A. Eastern Bartholomew Water | | | Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2018 | | |
| Mailing Address PO Box 487 | | | FEC Identification Number C | | |
| City Taylorsville | State IN | Zip Code 47280 | Amount of Each Disbursement this Period 35.22 | | |
| Purpose of Disbursement Utilities Expense - Pd by G. Pence | | Category/ Type | Transaction ID : SB17.43216 | | |
| Candidate Name | | <input checked="" type="checkbox"/> Memo Item | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|---|--|------------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) B. Fiddlers Three | | | Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2018 | | |
| Mailing Address 1415 E Michigan Rd | | | FEC Identification Number C | | |
| City Shelbyville | State IN | Zip Code 46176 | Amount of Each Disbursement this Period 3369.60 | | |
| Purpose of Disbursement District Christmas Party | | Category/ Type | Transaction ID : SB17.43225 | | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|---|--|------------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) C. First Virginia Community Bank | | | Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2018 | | |
| Mailing Address 11325 Random Hills Rd | | | FEC Identification Number C | | |
| City Fairfax | State VA | Zip Code 22030 | Amount of Each Disbursement this Period 119.40 | | |
| Purpose of Disbursement Bank Fees | | Category/ Type | Transaction ID : SB17.43266 | | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 3489.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 22 OF 34 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
GREG PENCE FOR CONGRESS

| | | | | |
|---|--|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) A. Gillaspie, Molly, , , | | | Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2018 | |
| Mailing Address 6105 Ralston Avenue | | | FEC Identification Number C | |
| City Indianapolis | State IN | Zip Code 46220 | Amount of Each Disbursement this Period 825.00 | |
| Purpose of Disbursement Communications Consultant | | Category/ Type | Transaction ID : SB17.43223 | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

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|---|--|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) B. Gillaspie, Molly, , , | | | Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2018 | |
| Mailing Address 6105 Ralston Avenue | | | FEC Identification Number C | |
| City Indianapolis | State IN | Zip Code 46220 | Amount of Each Disbursement this Period 825.00 | |
| Purpose of Disbursement Communications Consultant | | Category/ Type | Transaction ID : SB17.43227 | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

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|---|--|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) c. Global Payments | | | Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2018 | |
| Mailing Address 10705 Red Run Blvd. | | | FEC Identification Number C | |
| City Rockville | State MD | Zip Code 20855 | Amount of Each Disbursement this Period 387.43 | |
| Purpose of Disbursement Credit Card Processing Fees | | Category/ Type | Transaction ID : SB17.43267 | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 2037.43 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 23 OF 34 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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)
GREG PENCE FOR CONGRESS

| | | | | |
|---|--|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) A. Hall, Jordan, , Mr., | | | Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2018 | |
| Mailing Address 931 Fletcher Ave | | | FEC Identification Number C | |
| City Indianapolis | State IN | Zip Code 46203 | Amount of Each Disbursement this Period 1058.87 | |
| Purpose of Disbursement Payroll | | Category/ Type | Transaction ID : SB17.43175 | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

| | | | | |
|---|--|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) B. Hall, Jordan, , Mr., | | | Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2018 | |
| Mailing Address 931 Fletcher Ave | | | FEC Identification Number C | |
| City Indianapolis | State IN | Zip Code 46203 | Amount of Each Disbursement this Period 1008.88 | |
| Purpose of Disbursement Payroll | | Category/ Type | Transaction ID : SB17.43263 | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

| | | | | |
|---|--|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) C. Hall, Jordan, , Mr., | | | Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2018 | |
| Mailing Address 931 Fletcher Ave | | | FEC Identification Number C | |
| City Indianapolis | State IN | Zip Code 46203 | Amount of Each Disbursement this Period 1142.99 | |
| Purpose of Disbursement Payroll | | Category/ Type | Transaction ID : SB17.43245 | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 3210.74 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 24 OF 34 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
GREG PENCE FOR CONGRESS

| | | | | |
|---|--|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) A. Herbert, Jacob, , Mr., | | | Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2018 | |
| Mailing Address 5524 Goodwin St | | | FEC Identification Number C | |
| City Indianapolis | State IN | Zip Code 46234 | Amount of Each Disbursement this Period 1065.15 | |
| Purpose of Disbursement Payroll | | Category/ Type | Transaction ID : SB17.43176 | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

| | | | | |
|---|--|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) B. Herbert, Jacob, , Mr., | | | Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2018 | |
| Mailing Address 5524 Goodwin St | | | FEC Identification Number C | |
| City Indianapolis | State IN | Zip Code 46234 | Amount of Each Disbursement this Period 1015.16 | |
| Purpose of Disbursement Payroll | | Category/ Type | Transaction ID : SB17.43264 | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

| | | | | |
|---|--|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) C. Herbert, Jacob, , Mr., | | | Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2018 | |
| Mailing Address 5524 Goodwin St | | | FEC Identification Number C | |
| City Indianapolis | State IN | Zip Code 46234 | Amount of Each Disbursement this Period 1150.21 | |
| Purpose of Disbursement Payroll | | Category/ Type | Transaction ID : SB17.43246 | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 3230.52 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | | |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 25 OF 34 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
GREG PENCE FOR CONGRESS

| | | | | | |
|---|--|------------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) A. HSP Direct | | | Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2018 | | |
| Mailing Address 20130 Lakeview Center Plz Ste 300 | | | FEC Identification Number C | | |
| City Ashburn | State VA | Zip Code 20147 | Amount of Each Disbursement this Period 882.90 | | |
| Purpose of Disbursement Direct Mail Creative Management Fee | | Category/ Type | Transaction ID : SB17.43271 | | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

| | | | | | |
|---|--|------------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) B. Imge LLC | | | Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2018 | | |
| Mailing Address 108 S Washington St # 3 | | | FEC Identification Number C | | |
| City Alexandria | State VA | Zip Code 22314 | Amount of Each Disbursement this Period 3866.56 | | |
| Purpose of Disbursement Digital Ad Expense | | Category/ Type | Transaction ID : SB17.43167 | | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

| | | | | | |
|---|--|------------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) c. Imge LLC | | | Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2018 | | |
| Mailing Address 108 S Washington St # 3 | | | FEC Identification Number C | | |
| City Alexandria | State VA | Zip Code 22314 | Amount of Each Disbursement this Period 4020.00 | | |
| Purpose of Disbursement Digital Ad Expense | | Category/ Type | Transaction ID : SB17.43226 | | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 8769.46 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 26 OF 34 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
GREG PENCE FOR CONGRESS

| | | | | |
|---|--|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) A. Kyle Walker Consulting, LLC | | | Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2018 | |
| Mailing Address 6919 Royal Oakland Dr | | | FEC Identification Number C | |
| City Indianapolis | State IN | Zip Code 46236 | Amount of Each Disbursement this Period 534.16 | |
| Purpose of Disbursement Campaign Christmas Ornaments | | Category/ Type | Transaction ID : SB17.43170 | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

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|---|--|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) B. Kyle Walker Consulting, LLC | | | Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2018 | |
| Mailing Address 6919 Royal Oakland Dr | | | FEC Identification Number C | |
| City Indianapolis | State IN | Zip Code 46236 | Amount of Each Disbursement this Period 4000.00 | |
| Purpose of Disbursement Political Consulting | | Category/ Type | Transaction ID : SB17.43210 | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

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|---|--|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) c. Library of Congress | | | Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2018 | |
| Mailing Address 340 M St SW | | | FEC Identification Number C | |
| City Washington | State DC | Zip Code 20024 | Amount of Each Disbursement this Period 2100.00 | |
| Purpose of Disbursement Swearing In Reception | | Category/ Type | Transaction ID : SB17.43256 | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 6634.16 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 27 OF 34 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
GREG PENCE FOR CONGRESS

| | | | | |
|---|--|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) A. Maryland Street Garage | | | Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2018 | |
| Mailing Address 121 E Maryland St | | | FEC Identification Number C | |
| City Indianapolis | State IN | Zip Code 46204 | Amount of Each Disbursement this Period 528.00 | |
| Purpose of Disbursement Parking Expense | | Category/ Type | Transaction ID : SB17.43220 | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

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|---|--|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) B. Maryland Street Garage | | | Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2018 | |
| Mailing Address 121 E Maryland St | | | FEC Identification Number C | |
| City Indianapolis | State IN | Zip Code 46204 | Amount of Each Disbursement this Period 9.00 | |
| Purpose of Disbursement Parking Expense | | Category/ Type | Transaction ID : SB17.43230 | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

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|---|--|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) c. MDI Imaging & Mail | | | Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2018 | |
| Mailing Address 21955 Cascades Pkwy | | | FEC Identification Number C | |
| City Dulles | State VA | Zip Code 20166 | Amount of Each Disbursement this Period 8804.00 | |
| Purpose of Disbursement Direct Mail Postage & Delivery | | Category/ Type | Transaction ID : SB17.43270 | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 9341.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | | |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 28 OF 34 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
GREG PENCE FOR CONGRESS

| | | | | | |
|---|--|------------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) A. MDI Imaging & Mail | | | Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2018 | | |
| Mailing Address 21955 Cascades Pkwy | | | FEC Identification Number C | | |
| City Dulles | State VA | Zip Code 20166 | Amount of Each Disbursement this Period 4266.65 | | |
| Purpose of Disbursement Direct Mail Printing Expense | | Category/ Type | Transaction ID : SB17.43272 | | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

| | | | | | |
|---|--|------------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) B. MHRK | | | Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2018 | | |
| Mailing Address PO Box 4 | | | FEC Identification Number C | | |
| City Westfield | State IN | Zip Code 46074 | Amount of Each Disbursement this Period 5000.00 | | |
| Purpose of Disbursement Compliance Consulting | | Category/ Type | Transaction ID : SB17.43179 | | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|---|--|------------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) c. Pence, Gregory, J., Mr., | | | Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2018 | | |
| Mailing Address 482 S Mutz Dr | | | FEC Identification Number C | | |
| City Columbus | State IN | Zip Code 47201 | Amount of Each Disbursement this Period 2811.49 | | |
| Purpose of Disbursement Auto, Travel, Utilities Reimbursement | | Category/ Type | Transaction ID : SB17.43211 | | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 12078.14 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 29 OF 34 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
GREG PENCE FOR CONGRESS

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Progressive Insurance | | Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2018 |
| Mailing Address PO Box 94903 | | FEC Identification Number C |
| City Cleveland | State OH | Zip Code 44101 |
| Purpose of Disbursement Van Insurance - Pd by G. Pence | | Amount of Each Disbursement this Period 411.20 |
| Candidate Name | | Transaction ID : SB17.43212 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input checked="" type="checkbox"/> Memo Item |
| State: District: | Category/Type | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Scarlet Oak Restaurant | | Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2018 |
| Mailing Address 909 New Jersey Ave SE | | FEC Identification Number C |
| City Washington | State DC | Zip Code 20003 |
| Purpose of Disbursement Meals Expense | | Amount of Each Disbursement this Period 130.00 |
| Candidate Name | | Transaction ID : SB17.43200 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item |
| State: District: | Category/Type | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Sextons Creek | | Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2018 |
| Mailing Address 101 W Ohio St Ste 1800 | | FEC Identification Number C |
| City Indianapolis | State IN | Zip Code 46204 |
| Purpose of Disbursement Photography Expense | | Amount of Each Disbursement this Period 358.00 |
| Candidate Name | | Transaction ID : SB17.43168 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item |
| State: District: | Category/Type | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 488.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 30 OF 34 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
GREG PENCE FOR CONGRESS

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Sunrise Data Services | | Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2018 |
| Mailing Address 20130 Lakeview Center Plz Ste 300 | | FEC Identification Number C |
| City Ashburn | State VA | Zip Code 20147 |
| Purpose of Disbursement Direct Mail List Processing | Category/Type | |
| Candidate Name | Amount of Each Disbursement this Period 173.83 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID : SB17.43268 |
| State: District: | <input type="checkbox"/> Memo Item | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Sunrise Data Services | | Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2018 |
| Mailing Address 20130 Lakeview Center Plz Ste 300 | | FEC Identification Number C |
| City Ashburn | State VA | Zip Code 20147 |
| Purpose of Disbursement Direct Mail List Processing | Category/Type | |
| Candidate Name | Amount of Each Disbursement this Period 500.46 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID : SB17.43273 |
| State: District: | <input type="checkbox"/> Memo Item | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Trump International Hotel | | Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2018 |
| Mailing Address 1100 Pennsylvania Ave NW | | FEC Identification Number C |
| City Washington | State DC | Zip Code 20004 |
| Purpose of Disbursement Lodging Expense - Pd by G. Pence | Category/Type | |
| Candidate Name | Amount of Each Disbursement this Period 1900.60 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID : SB17.43213 |
| State: District: | <input checked="" type="checkbox"/> Memo Item | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 674.29 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 31 OF 34 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
GREG PENCE FOR CONGRESS

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Trump International Hotel | | Date of Disbursement |
| Mailing Address 1100 Pennsylvania Ave NW | | M M / D D / Y Y Y Y 12 / 07 / 2018 |
| City Washington | State DC | Zip Code 20004 |
| Purpose of Disbursement Reception Expense | | FEC Identification Number C |
| Candidate Name | | Amount of Each Disbursement this Period 6000.00 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID : SB17.43222 |
| State: District: | | <input type="checkbox"/> Memo Item |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Trump International Hotel | | Date of Disbursement |
| Mailing Address 1100 Pennsylvania Ave NW | | M M / D D / Y Y Y Y 12 / 14 / 2018 |
| City Washington | State DC | Zip Code 20004 |
| Purpose of Disbursement Lodging Expense | | FEC Identification Number C |
| Candidate Name | | Amount of Each Disbursement this Period 511.53 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID : SB17.43234 |
| State: District: | | <input type="checkbox"/> Memo Item |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) c. Uber Technologies | | Date of Disbursement |
| Mailing Address 182 Howard St | | M M / D D / Y Y Y Y 12 / 05 / 2018 |
| City San Francisco | State CA | Zip Code 94105 |
| Purpose of Disbursement Travel Expense - Pd by G. Pence | | FEC Identification Number C |
| Candidate Name | | Amount of Each Disbursement this Period 20.65 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID : SB17.43214 |
| State: District: | | <input checked="" type="checkbox"/> Memo Item |

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|--|---------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 6511.53 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 32 OF 34 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
GREG PENCE FOR CONGRESS

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. United States Post Offices | | Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2018 |
| Mailing Address 125 W South St | | FEC Identification Number C |
| City Indianapolis | State IN | Zip Code 46206 |
| Purpose of Disbursement Postage Expense | | Amount of Each Disbursement this Period 188.00 |
| Candidate Name | | Transaction ID : SB17.43258 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Washington Intelligence Bureau | | Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2018 |
| Mailing Address 4128 Pepsi Pl | | FEC Identification Number C |
| City Chantilly | State VA | Zip Code 20151 |
| Purpose of Disbursement Direct Mail Postage & Delivery | | Amount of Each Disbursement this Period 250.00 |
| Candidate Name | | Transaction ID : SB17.43269 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item |
| State: District: | | |

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|---|--|---|
| Full Name (Last, First, Middle Initial) c. Washington Intelligence Bureau | | Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2018 |
| Mailing Address 4128 Pepsi Pl | | FEC Identification Number C |
| City Chantilly | State VA | Zip Code 20151 |
| Purpose of Disbursement Direct Mail Postage | | Amount of Each Disbursement this Period 1391.29 |
| Candidate Name | | Transaction ID : SB17.43274 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 1829.29 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 33 OF 34 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
GREG PENCE FOR CONGRESS

| | | | | |
|---|--|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) A. Weintraub, Joshua, , , | | | Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2018 | |
| Mailing Address 14401 Kings Grant St | | | FEC Identification Number C | |
| City North Potomac | State MD | Zip Code 20878 | Amount of Each Disbursement this Period 1041.38 | |
| Purpose of Disbursement Payroll | | Category/ Type | Transaction ID : SB17.43177 | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

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|---|--|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) B. Weintraub, Joshua, , , | | | Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2018 | |
| Mailing Address 14401 Kings Grant St | | | FEC Identification Number C | |
| City North Potomac | State MD | Zip Code 20878 | Amount of Each Disbursement this Period 991.39 | |
| Purpose of Disbursement Payroll | | Category/ Type | Transaction ID : SB17.43265 | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

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|---|--|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) C. Weintraub, Joshua, , , | | | Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2018 | |
| Mailing Address 14401 Kings Grant St | | | FEC Identification Number C | |
| City North Potomac | State MD | Zip Code 20878 | Amount of Each Disbursement this Period 1125.99 | |
| Purpose of Disbursement Payroll | | Category/ Type | Transaction ID : SB17.43247 | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 3158.76 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 34 OF 34 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
GREG PENCE FOR CONGRESS

| | | | | |
|---|--|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) A. Zaharakos | | | Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2018 | |
| Mailing Address 329 Washington St | | | FEC Identification Number C | |
| City Columbus | State IN | Zip Code 47201 | Amount of Each Disbursement this Period 32.00 | |
| Purpose of Disbursement Meals Expense | | Category/Type | Transaction ID : SB17.43208 | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

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|---|--|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) B. Zaharakos | | | Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2018 | |
| Mailing Address 329 Washington St | | | FEC Identification Number C | |
| City Columbus | State IN | Zip Code 47201 | Amount of Each Disbursement this Period 41.00 | |
| Purpose of Disbursement Meals Expense | | Category/Type | Transaction ID : SB17.43205 | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

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|---|--|---------------|---|--|
| Full Name (Last, First, Middle Initial) C. | | | Date of Disbursement M M / D D / Y Y Y Y | |
| Mailing Address | | | FEC Identification Number C | |
| City | State | Zip Code | Amount of Each Disbursement this Period | |
| Purpose of Disbursement | | Category/Type | Memo Item | |
| Candidate Name | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

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|--|----------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 73.00 |
| TOTAL This Period (last page this line number only).....▶ | 83805.12 |