

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
SOUDER FOR CONGRESS, INC.

ADDRESS (number and street) P.O. BOX 40233  
 Check if different than previously reported. (ACC)  
FORT WAYNE IN 46804

2. **FEC IDENTIFICATION NUMBER** C00285189  
**IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)  
**CITY** **STATE** **ZIP CODE** **STATE** **DISTRICT**  
IN 3

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 Termination Report (TER)

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

5. Covering Period 07 01 2007 through 09 30 2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer JEFFREY L. TURNER  
Signature of Treasurer Electronically Filed by JEFFREY L. TURNER Date 10 13 2007

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

SOUDER FOR CONGRESS, INC.

Report Covering the Period: From:    To:

|   | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|---|-------------------------|------------------------------------|
| <b>6. Net Contributions (other than loans)</b>  |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e)).....  | 82784.18                | 211972.29                          |
| (b) Total Contribution Refunds<br>(from Line 20(d)).....  | 0.00                    | 0.00                               |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)).....                              | 82784.18                | 211972.29                          |
| <b>7. Net Operating Expenditures</b>  |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17).....   | 29658.58                | 122274.79                          |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14).....  | 0.00                    | 0.00                               |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)).....  | 29658.58                | 122274.79                          |
| <b>8. Cash on Hand at Close of<br/>Reporting Period (from Line 27).....</b>                                       | 145071.57               |                                    |
| <b>9. Debts and Obligations Owed TO<br/>the Committee (Itemize all on<br/>Schedule C and/or Schedule D).....</b>  | 0.00                    |                                    |
| <b>10. Debts and Obligations Owed BY<br/>the Committee (Itemize all on<br/>Schedule C and/or Schedule D).....</b> | 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

Write or Type Committee Name  
SOUDER FOR CONGRESS, INC.

Report Covering the Period: From: 

|   |   |
|---|---|
| M | M |
| 0 | 7 |

|   |   |
|---|---|
| D | D |
| 0 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

 To: 

|   |   |
|---|---|
| M | M |
| 0 | 9 |

|   |   |
|---|---|
| D | D |
| 3 | 0 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

**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).....

35423.00

100373.00

(ii) Unitemized.....

6946.88

25468.49

(iii) TOTAL of contributions

42369.88

125841.49

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

(c) Other Political Committees (such as PACS).....

40414.30

86130.80

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))

82784.18

211972.29

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.).....

0.00

0.00

15. OTHER RECEIPTS

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

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

82784.18

211972.29

**DETAILED SUMMARY PAGE**  
of Disbursements

| <b>II. DISBURSEMENTS</b>   | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Election Cycle-to-Date</b> |
|--|---------------------------------------|--|
| 17. OPERATING EXPENDITURES.....  | 29658.58                              | 122274.79                                  |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES.....                         | 0.00                                  | 0.00                                       |
| 19. LOAN REPAYMENTS:   |                                       |  |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....                     | 0.00                                  | 0.00                                       |
| (b) Of all Other Loans.....  | 0.00                                  | 0.00                                       |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....                  | 0.00                                  | 0.00                                       |
| 20. REFUNDS OF CONTRIBUTIONS TO:   |                                       |  |
| (a) Individuals/Persons Other<br>Than Political Committees.....              | 0.00                                  | 0.00                                       |
| (b) Political Party Committees.....  | 0.00                                  | 0.00                                       |
| (c) Other Political Committees<br>(such as PACs).....                        | 0.00                                  | 0.00                                       |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....       | 0.00                                  | 0.00                                       |
| 21. OTHER DISBURSEMENTS.....   | 0.00                                  | 0.00                                       |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) ▶ | 29658.58                              | 122274.79                                  |

**III. CASH SUMMARY**

|   |           |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | 91945.97  |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....                             | 82784.18  |
| 25. SUBTOTAL (add Line 23 and Line 24).....   | 174730.15 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 29658.58  |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 145071.57 |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 5 / 69                  |
|  | <input type="checkbox"/> 11a            | <input type="checkbox"/> 11b |
|  | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d |
|  | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a |
|  | <input type="checkbox"/> 13b            | <input type="checkbox"/> 14  |
|  |   | <input type="checkbox"/> 15  |

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NAME OF COMMITTEE (In Full)  
**SOUDER FOR CONGRESS, INC.**

|   |             |  |  |
|---|-------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Action Committee for Rural Electrificati</b>   |             | Date of Receipt<br>M M / D D / Y Y Y Y<br>09 / 28 / 2007   |  |
| Mailing Address 4301 Wilson Blvd  |             | <b>Transaction ID: 71013.C12002</b>  |  |
| City<br>Arlington   | State<br>VA | Amount of Each Receipt this Period<br>1000.00  |  |
| Zip Code<br>22203-1860  |             | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |  |
| FEC ID number of contributing federal political committee.<br><b>C C00002972</b>  |             | Name of Employer<br>Occupation   |  |
| Receipt For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>1000.00  |  |

|   |             |  |  |
|---|-------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. AISI Steel PAC</b>   |             | Date of Receipt<br>M M / D D / Y Y Y Y<br>09 / 19 / 2007   |  |
| Mailing Address 1140 Connecticut Avenue, NW Suite 705   |             | <b>Transaction ID: 71010.C11913</b>  |  |
| City<br>Washington  | State<br>DC | Amount of Each Receipt this Period<br>1000.00  |  |
| Zip Code<br>20036   |             | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |  |
| FEC ID number of contributing federal political committee.<br><b>C C00295097</b>  |             | Name of Employer<br>Occupation   |  |
| Receipt For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>1000.00  |  |

|   |             |  |  |
|---|-------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. American Bankers Assoc.</b>  |             | Date of Receipt<br>M M / D D / Y Y Y Y<br>09 / 28 / 2007   |  |
| Mailing Address 1120 Connecticut Avenue N. W.   |             | <b>Transaction ID: 71010.C11980</b>  |  |
| City<br>Washington  | State<br>DC | Amount of Each Receipt this Period<br>1000.00  |  |
| Zip Code<br>20036   |             | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |  |
| FEC ID number of contributing federal political committee.<br><b>C C00004275</b>  |             | Name of Employer<br>Occupation   |  |
| Receipt For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>2000.00  |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 3000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | _____   |

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

|  |   |             |
|--|---|-------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 6 / 69 |
|  | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d                |             |
|  | <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15 |             |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. AOTPAC</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 8 / 0 2 / 2 0 0 7 |  |
| Mailing Address 4720 Montgomery Lane  |  | <b>Transaction ID: 70926.C11716</b>                           |  |
| City State Zip Code<br>Bethesda MD 20814  | Amount of Each Receipt this Period<br>1000.00  |   |  |
| FEC ID number of contributing federal political committee.<br><b>C C00089086</b>  | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |   |  |
| Name of Employer Occupation   | Election Cycle-to-Date ▼<br>1000.00  |   |  |
| Receipt For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Associated Builders and Contractors</b>  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 9 / 2 7 / 2 0 0 7 |  |
| Mailing Address 4250 North Fairfax Drive<br>9th Floor   |  | <b>Transaction ID: 71010.C11959</b>                           |  |
| City State Zip Code<br>Arlington VA 22203   | Amount of Each Receipt this Period<br>2500.00  |   |  |
| FEC ID number of contributing federal political committee.<br><b>C C00010421</b>  | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |   |  |
| Name of Employer Occupation   | Election Cycle-to-Date ▼<br>2500.00  |   |  |
| Receipt For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Associated Builders and Contractors</b>  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 9 / 2 8 / 2 0 0 7 |  |
| Mailing Address 4250 North Fairfax Drive<br>9th Floor   |  | <b>Transaction ID: 71013.C12004</b>                           |  |
| City State Zip Code<br>Arlington VA 22203   | Amount of Each Receipt this Period<br>2500.00  |   |  |
| FEC ID number of contributing federal political committee.<br><b>C C00010421</b>  | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |   |  |
| Name of Employer Occupation   | Election Cycle-to-Date ▼<br>5000.00  |   |  |
| Receipt For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |   |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 6000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 7 / 69                  |
|  | <input type="checkbox"/> 11a            | <input type="checkbox"/> 11b |
|  | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d |
|  | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a |
|  | <input type="checkbox"/> 13b            | <input type="checkbox"/> 14  |
|  |   | <input type="checkbox"/> 15  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

**A.** Full Name (Last, First, Middle Initial)  
AT&T PAC

Mailing Address 175 E. Houston, Rm. 7-A-50

City San Antonio State TX Zip Code 78205

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer AT&T PAC Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 18 / 2007

**Transaction ID:** 71010.C11891

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
AT&T PAC

Mailing Address 175 E. Houston, Rm. 7-A-50

City San Antonio State TX Zip Code 78205

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer AT&T PAC Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 28 / 2007

**Transaction ID:** 71010.C11979

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
B & D Sagamore PAC

Mailing Address 300 N. Meridian St Suite 2700

City Indianapolis State IN Zip Code 46204

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 19 / 2007

**Transaction ID:** 71010.C11911

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2500.00

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

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

|  |   |             |
|--|---|-------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 8 / 69 |
|  | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d                |             |
|  | <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15 |             |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

**A.** Full Name (Last, First, Middle Initial)  
BAE Systems PAC

Mailing Address 1300 N 17th St

City State Zip Code  
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00281212

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
MM / DD / YYYY  
07 / 30 / 2007

Transaction ID: 70926.C11707

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Boeing Political Action Committee

Mailing Address 1200 Wilson Boulevard

City State Zip Code  
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
MM / DD / YYYY  
07 / 30 / 2007

Transaction ID: 70926.C11706

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Conservative Victory Fund

Mailing Address P.O. Box 15245  
Capitol Hill

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00009704

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
830.80

Date of Receipt  
MM / DD / YYYY  
08 / 01 / 2007

Transaction ID: 70926.C11694

Amount of Each Receipt this Period  
414.30

In-Kind  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

003 Event Announcement

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 2414.30 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |



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

|  |   |             |
|--|---|-------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 9 / 69 |
|  | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d                |             |
|  | <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15 |             |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

**A.** Full Name (Last, First, Middle Initial)  
Credit Union Legislative A.C.

Mailing Address 555 Eleventh St., NW  
Suite 300

City Washington State DC Zip Code 20004-1311

FEC ID number of contributing federal political committee. **C** C00007880

Name of Employer Credit Union Legislative A.C. Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 24 / 2007

Transaction ID: 71010.C11946

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Dealers Election Action Comm

Mailing Address 8400 Westpark Drive

City McLean State VA Zip Code 22102

FEC ID number of contributing federal political committee. **C** C00040998

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 28 / 2007

Transaction ID: 71010.C11976

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Eli Lilly and Co., PAC

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285

FEC ID number of contributing federal political committee. **C** C00082792

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 28 / 2007

Transaction ID: 71010.C11975

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2500.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

|  |   |              |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 10 / 69 |
|  | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d                |              |
|  | <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15 |              |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Hardwood Federation PAC     |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>09 / 18 / 2007 |
| Mailing Address P.O. Box 34518   |   | Transaction ID: 71010.C11887                               |
| City State Zip Code<br>Memphis TN 38184-0518                                     | Amount of Each Receipt this Period<br>1000.00   |  |
| FEC ID number of contributing federal political committee.<br><b>C</b> C00396671 | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  |  |
| Name of Employer Occupation  | Receipt For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| Election Cycle-to-Date ▼<br>1000.00  |   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Hardwood Federation PAC     |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>09 / 25 / 2007 |
| Mailing Address P.O. Box 34518   |   | Transaction ID: 71010.C11953                               |
| City State Zip Code<br>Memphis TN 38184-0518                                     | Amount of Each Receipt this Period<br>1000.00   |  |
| FEC ID number of contributing federal political committee.<br><b>C</b> C00396671 | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  |  |
| Name of Employer Occupation  | Receipt For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| Election Cycle-to-Date ▼<br>2000.00  |   |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> International Association of Fire Fighte |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>09 / 24 / 2007 |
| Mailing Address 1750 New York Ave, NW   |   | Transaction ID: 71010.C11981                               |
| City State Zip Code<br>Washington DC 20006  | Amount of Each Receipt this Period<br>1000.00   |  |
| FEC ID number of contributing federal political committee.<br><b>C</b> C00029447              | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  |  |
| Name of Employer Occupation   | Receipt For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| Election Cycle-to-Date ▼<br>1000.00   |   |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 3000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |

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

|  |   |              |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 11 / 69 |
|  | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d                |              |
|  | <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15 |              |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

**A.** Full Name (Last, First, Middle Initial)  
ITT Industries PAC

Mailing Address 4 West Oak Lane

City State Zip Code  
White Plains NY 10604

FEC ID number of contributing federal political committee. **C** C00141002

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 28 / 2007

**Transaction ID:** 71010.C11977

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 655 15th St., NW Suite 445

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00236489

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6000.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 19 / 2007

**Transaction ID:** 71010.C11910

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 655 15th St., NW Suite 445

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00236489

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7000.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 24 / 2007

**Transaction ID:** 71010.C11945

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 3000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |                              |   |
|--|------------------------------|---|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             | PAGE 12 / 69                            |
|  | (check only one)             |   |
| <input type="checkbox"/> 11a   | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b            |
|  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             |

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NAME OF COMMITTEE (In Full)  
**SOUDER FOR CONGRESS, INC.**

**A.** Full Name (Last, First, Middle Initial)  
 Lincoln National Corporation PAC

Mailing Address 1300 South Clinton Street

City State Zip Code  
**Fort Wayne IN 46801**

FEC ID number of contributing federal political committee. **C C00110577**

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**09 18 2007**

**Transaction ID: 71010.C11890**

Amount of Each Receipt this Period  
 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
 National Action Committee

Mailing Address 3389 Sheridan Street, Suite 424

City State Zip Code  
**Hollywood FL 33021**

FEC ID number of contributing federal political committee. **C C00147983**

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**09 30 2007**

**Transaction ID: 71010.C11985**

Amount of Each Receipt this Period  
 2500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
 National Funeral Directors Assn. PAC

Mailing Address 13625 Bishops Dr.

City State Zip Code  
**Brookfield WI 53005**

FEC ID number of contributing federal political committee. **C C00204008**

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**09 19 2007**

**Transaction ID: 71010.C11918**

Amount of Each Receipt this Period  
 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4500.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

|  |   |              |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 13 / 69 |
|  | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d                |              |
|  | <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15 |              |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> NISource Inc. PAC  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>09 / 28 / 2007   |
| Mailing Address 200 Civic Center Dr.  |   | Transaction ID: 71013.C12003   |
| City State Zip Code<br>Columbus OH 43215  | Amount of Each Receipt this Period<br>1000.00 |  |
| FEC ID number of contributing federal political committee.<br><b>C</b> C00051979  |   | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer  | Occupation                                    |  |
| Receipt For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>2000.00           |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> NRA Political Victory Fund   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>08 / 27 / 2007   |
| Mailing Address 11250 Waples Mill Rd.   |   | Transaction ID: 70926.C11769   |
| City State Zip Code<br>Fairfax VA 22030-7400  | Amount of Each Receipt this Period<br>1000.00 |  |
| FEC ID number of contributing federal political committee.<br><b>C</b> C00053553  |   | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer  | Occupation                                    |  |
| Receipt For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>2000.00           |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> NRA Political Victory Fund   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>09 / 25 / 2007   |
| Mailing Address 11250 Waples Mill Rd.   |   | Transaction ID: 71010.C11971   |
| City State Zip Code<br>Fairfax VA 22030-7400  | Amount of Each Receipt this Period<br>1000.00 |  |
| FEC ID number of contributing federal political committee.<br><b>C</b> C00053553  |   | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer  | Occupation                                    |  |
| Receipt For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>3000.00           |  |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 3000.00     |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

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

|  |   |              |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 14 / 69 |
|  | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d                |              |
|  | <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15 |              |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Nucor Corporation PAC       |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>09 / 19 / 2007 |
| Mailing Address 2100 Rexford Road  |   | Transaction ID: 71010.C11916                             |
| City State Zip Code<br>Charlotte NC 28211  | Amount of Each Receipt this Period<br>1000.00   |  |
| FEC ID number of contributing federal political committee.<br><b>C</b> C00379628 | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  |  |
| Name of Employer Occupation  | Receipt For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| Election Cycle-to-Date ▼<br>1000.00  |   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Nucor Corporation PAC       |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>09 / 19 / 2007 |
| Mailing Address 2100 Rexford Road  |   | Transaction ID: 71010.C11915                             |
| City State Zip Code<br>Charlotte NC 28211  | Amount of Each Receipt this Period<br>2000.00   |  |
| FEC ID number of contributing federal political committee.<br><b>C</b> C00379628 | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  |  |
| Name of Employer Occupation  | Receipt For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| Election Cycle-to-Date ▼<br>3000.00  |   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Physical Therapy PAC        |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>09 / 25 / 2007 |
| Mailing Address 111 N. Fairfax St  |   | Transaction ID: 71010.C11954                             |
| City State Zip Code<br>Alexandria VA 22314-1488                                  | Amount of Each Receipt this Period<br>1000.00   |  |
| FEC ID number of contributing federal political committee.<br><b>C</b> C00012880 | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  |  |
| Name of Employer Occupation<br>Physical Therapy, PAC                             | Receipt For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| Election Cycle-to-Date ▼<br>3000.00  |   |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 4000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |

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

|  |                              |   |
|--|------------------------------|---|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 15 / 69                            |
|  | (check only one)             |   |
| <input type="checkbox"/> 11a   | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b            |
|  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             |

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NAME OF COMMITTEE (In Full)  
**SOUDER FOR CONGRESS, INC.**

**A.** Full Name (Last, First, Middle Initial)  
 Raytheon PAC

Mailing Address 141 Spring Street

City State Zip Code  
 Lexington MA 02421

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 19 / 2007

**Transaction ID:** 71010.C11909

Amount of Each Receipt this Period  
 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
 Sallie Mae, Inc. PAC

Mailing Address 12061 Bluemont Way

City State Zip Code  
 Reston VA 20190

FEC ID number of contributing federal political committee. **C** C00331835

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 28 / 2007

**Transaction ID:** 71010.C11978

Amount of Each Receipt this Period  
 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
 TRIAD GOOD GOVERNMENT FUND

Mailing Address 13455 Noel Rd.

City State Zip Code  
 Dallas TX 75240

FEC ID number of contributing federal political committee. **C** C00347062

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 18 / 2007

**Transaction ID:** 71010.C11919

Amount of Each Receipt this Period  
 500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2500.00**

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

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

|  |                              |   |
|--|------------------------------|---|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 16 / 69                            |
|  | (check only one)             |   |
| <input type="checkbox"/> 11a   | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b            |
|  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

**A.** Full Name (Last, First, Middle Initial)  
UPSPAC

Mailing Address 55 Glenlake Parkway, NE

City Atlanta State GA Zip Code 30328

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 19 / 2007

**Transaction ID:** 71010.C11917

Amount of Each Receipt this Period  
 2000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Verizon Comm. Inc. Good Gov. Club

Mailing Address 1717 Arch Street 47-S

City Philadelphia State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C** C00186288

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 27 / 2007

**Transaction ID:** 71010.C11972

Amount of Each Receipt this Period  
 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Wellpoint, Inc. Wellpac

Mailing Address 120 Monument Circle

City Indianapolis State IN Zip Code 46204

FEC ID number of contributing federal political committee. **C** C00197228

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 25 / 2007

**Transaction ID:** 71010.C11970

Amount of Each Receipt this Period  
 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

|  |                 |
|--|-----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>4000.00</b>  |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <b>40414.30</b> |



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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 17 / 69                 |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 11d |
|  | <input type="checkbox"/> 13b            | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 15             |                              |

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NAME OF COMMITTEE (In Full)  
**SOUDER FOR CONGRESS, INC.**

|   |                                    |  |  |
|---|------------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Danny Allen</b>  |                                    | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 8 / 2 2 / 2 0 0 7  |  |
| Mailing Address 4020 S. Wolf Rd   |                                    | <b>Transaction ID: 70926.C11773</b>  |  |
| City State Zip Code<br>Columbia City IN 46725   |                                    | Amount of Each Receipt this Period<br>50.00  |  |
| FEC ID number of contributing federal political committee.<br>C   |                                    | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |  |
| Name of Employer<br>Allen Plastic Repair, Inc.  | Occupation<br>Administrator        |  |  |
| Receipt For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>300.00 |  |  |

|   |                                    |  |  |
|---|------------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Danny Allen</b>  |                                    | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 9 / 2 5 / 2 0 0 7  |  |
| Mailing Address 4020 S. Wolf Rd   |                                    | <b>Transaction ID: 71010.C11948</b>  |  |
| City State Zip Code<br>Columbia City IN 46725   |                                    | Amount of Each Receipt this Period<br>50.00  |  |
| FEC ID number of contributing federal political committee.<br>C   |                                    | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |  |
| Name of Employer<br>Allen Plastic Repair, Inc.  | Occupation<br>Administrator        |  |  |
| Receipt For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>350.00 |  |  |

|   |                                    |  |  |
|---|------------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Gordon Anderson</b>  |                                    | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 9 / 1 8 / 2 0 0 7  |  |
| Mailing Address 1640 S. 100 E.  |                                    | <b>Transaction ID: 71010.C11885</b>  |  |
| City State Zip Code<br>Angola IN 46703  |                                    | Amount of Each Receipt this Period<br>250.00   |  |
| FEC ID number of contributing federal political committee.<br>C   |                                    | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |  |
| Name of Employer<br>Self  | Occupation<br>Business owner       |  |  |
| Receipt For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>350.00 |  |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 350.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |        |

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 18 / 69                 |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 11d |
|  | <input type="checkbox"/> 13b            | <input type="checkbox"/> 14  |
|  |   | <input type="checkbox"/> 15  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

**A.** Full Name (Last, First, Middle Initial)  
Frank Avila

Mailing Address PO Box 246

City State Zip Code  
Roanoke IN 46783

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

600.00

Date of Receipt  
MM / DD / YYYY  
08 / 17 / 2007

Transaction ID: 70926.C11800

Amount of Each Receipt this Period  
400.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Joyce Baumgartner

Mailing Address 113 Northwood Dr.

City State Zip Code  
Bluffton IN 46714

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

Name of Employer Self Occupation farm chem/ag product

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

200.00

Date of Receipt  
MM / DD / YYYY  
09 / 18 / 2007

Transaction ID: 71010.C11875

Amount of Each Receipt this Period  
200.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Ted Beer

Mailing Address P.O. Box 91

City State Zip Code  
North Webster IN 46555

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

450.00

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2007

Transaction ID: 70926.C11695

Amount of Each Receipt this Period  
450.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 1050.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 19 / 69                 |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 11d |
|  | <input type="checkbox"/> 13b            | <input type="checkbox"/> 14  |
|  |   | <input type="checkbox"/> 15  |

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NAME OF COMMITTEE (In Full)  
**SOUDER FOR CONGRESS, INC.**

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Sharon Bodenhafer</b>  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 8 / 2 2 / 2 0 0 7  |  |
| Mailing Address 18130 Coldwater Rd.   |  | <b>Transaction ID: 70926.C11775</b>  |  |
| City State Zip Code<br>Huntertown IN 46748  | Amount of Each Receipt this Period<br>100.00 |  |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |  |
| Name of Employer Occupation<br>Homemaker  | Election Cycle-to-Date ▼<br>200.00           |  |  |
| Receipt For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |  |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. David Boodt</b>  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 8 / 0 2 / 2 0 0 7  |  |
| Mailing Address 525 Dorset Blvd   |  | <b>Transaction ID: 70926.C11712</b>  |  |
| City State Zip Code<br>Carmel IN 46032  | Amount of Each Receipt this Period<br>250.00 |  |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |  |
| Name of Employer Information Requested Occupation<br>Information Requested  | Election Cycle-to-Date ▼<br>250.00           |  |  |
| Receipt For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |  |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. William Burton</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 8 / 1 5 / 2 0 0 7  |  |
| Mailing Address 2116 Caravelle Dr.  |  | <b>Transaction ID: 70926.C11791</b>  |  |
| City State Zip Code<br>Fort Wayne IN 46814-9171   | Amount of Each Receipt this Period<br>200.00 |  |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |  |
| Name of Employer Occupation<br>Indiana Wesleyan Professor   | Election Cycle-to-Date ▼<br>400.00           |  |  |
| Receipt For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 550.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |        |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 20 / 69                 |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 11d |
|  | <input type="checkbox"/> 13b            | <input type="checkbox"/> 14  |
|  |   | <input type="checkbox"/> 15  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

**A.** Full Name (Last, First, Middle Initial)  
Edward Dahm

Mailing Address 1310 E. State Blvd.

City State Zip Code  
Fort Wayne IN 46805

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

Name of Employer Occupation  
Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 18 / 2007

Transaction ID: 71010.C11886

Amount of Each Receipt this Period  
200.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
E. Mark Deister

Mailing Address 13110 Aboite Ctr. Rd.

City State Zip Code  
Fort Wayne IN 46804

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

Name of Employer Occupation  
Deister Machine President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

4300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 17 / 2007

Transaction ID: 70926.C11807

Amount of Each Receipt this Period  
2000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
E. Mark Deister

Mailing Address 13110 Aboite Ctr. Rd.

City State Zip Code  
Fort Wayne IN 46804

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

Name of Employer Occupation  
Deister Machine President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

4300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 17 / 2007

Transaction ID: 71010.C11999

Amount of Each Receipt this Period  
2000.00

Redesignation FROM Memo  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **2200.00**

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

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 21 / 69                 |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 11d |
|  | <input type="checkbox"/> 13b            | <input type="checkbox"/> 14  |
|  |   | <input type="checkbox"/> 15  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

**A.** Full Name (Last, First, Middle Initial)  
E. Mark Deister

Mailing Address 13110 Aboite Ctr. Rd.

City State Zip Code  
Fort Wayne IN 46804

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

Name of Employer  
Deister Machine

Occupation  
President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4300.00

Date of Receipt  
MM / DD / YYYY  
08 / 17 / 2007

Transaction ID: 71010.C11998

Amount of Each Receipt this Period  
-2000.00

Redesignation TO Memo  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Robert J. Deputy

Mailing Address 22628 Weatherby Lane

City State Zip Code  
Elkhart IN 46514

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

Name of Employer

Occupation  
Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2007

Transaction ID: 71010.C11901

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Brian Emerick

Mailing Address 5865 E. SR 14

City State Zip Code  
Columbia City IN 46725-9237

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

Name of Employer  
Micropulse, Inc.

Occupation  
Owner/President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
400.00

Date of Receipt  
MM / DD / YYYY  
08 / 13 / 2007

Transaction ID: 70926.C11757

Amount of Each Receipt this Period  
200.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>700.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |               |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 22 / 69                 |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 11d |
|  | <input type="checkbox"/> 13b            | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 15             |                              |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

**A.** Full Name (Last, First, Middle Initial)  
Brian Emerick

Mailing Address 5865 E. SR 14

City State Zip Code  
Columbia City IN 46725-9237

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

Name of Employer Occupation  
Micropulse, Inc. Owner/President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
600.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 18 / 2007

Transaction ID: 71010.C11827

Amount of Each Receipt this Period  
200.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Matthew Eppers

Mailing Address P.O. Box 2983

City State Zip Code  
Elkhart IN 46515-2983

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

Name of Employer Occupation  
E Industries Owner

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 19 / 2007

Transaction ID: 71010.C11905

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Laurence Feiler III

Mailing Address 3737 Oak Ridge Drive

City State Zip Code  
Elkhart IN 46517

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
200.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 19 / 2007

Transaction ID: 71010.C11900

Amount of Each Receipt this Period  
200.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **650.00**

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

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 23 / 69                 |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 11d |
|  | <input type="checkbox"/> 13b            | <input type="checkbox"/> 14  |
|  |   | <input type="checkbox"/> 15  |

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NAME OF COMMITTEE (In Full)  
**SOUDER FOR CONGRESS, INC.**

**A.** Full Name (Last, First, Middle Initial)  
 Gloria Fink

Mailing Address 1107 Cabrioleet

City State Zip Code  
 Auburn IN 46706

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

Name of Employer Occupation  
 Homemaker Homemaker

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 10 / 2007

**Transaction ID:** 70926.C11752

Amount of Each Receipt this Period  
 100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
 Linda Glanzman

Mailing Address 3761 NW 64TH Ln.

City State Zip Code  
 Boca Raton FL 33496-4060

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

Name of Employer Occupation  
 Homemaker Homemaker

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2007

**Transaction ID:** 71010.C11984

Amount of Each Receipt this Period  
 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
 GOAL Financial, LLC

Mailing Address 9477 Waples Street Suite 100

City State Zip Code  
 San Diego CA 92121

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 25 / 2007

**Transaction ID:** 71010.C11996

Amount of Each Receipt this Period  
 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2100.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 24 / 69                 |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 11d |
|  | <input type="checkbox"/> 13b            | <input type="checkbox"/> 14  |
|  |   | <input type="checkbox"/> 15  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

**A.** Full Name (Last, First, Middle Initial)  
Tim Case

Mailing Address 9477 Waples Street  
Suite 100

City San Diego State CA Zip Code 92121

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

Name of Employer GOAL Financial, LLC Occupation Chief Operating Officer

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2007

Transaction ID: 71010.C11997

Amount of Each Receipt this Period  
1000.00

Memo  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
Partnership->GOAL Financial, LLC

**B.** Full Name (Last, First, Middle Initial)  
James Griffith

Mailing Address 1520 Lake Ave.

City Fort Wayne State IN Zip Code 46805

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

Name of Employer Retired Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 23 / 2007

Transaction ID: 70926.C11698

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
James Griffith

Mailing Address 1520 Lake Ave.

City Fort Wayne State IN Zip Code 46805

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

Name of Employer Retired Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 18 / 2007

Transaction ID: 71010.C11884

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

|  |   |        |
|--|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 200.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |        |



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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 25 / 69                 |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 11d |
|  | <input type="checkbox"/> 13b            | <input type="checkbox"/> 14  |
|  |   | <input type="checkbox"/> 15  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

**A.** Full Name (Last, First, Middle Initial)  
Donald Gunden

Mailing Address 64874 Orchard Dr.

City State Zip Code  
Goshen IN 46526

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

Name of Employer Occupation  
Forest River, Inc. Division G.M.

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 09 / 2007

Transaction ID: 70926.C11739

Amount of Each Receipt this Period  
200.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
David Haist

Mailing Address P.O. Box 127

City State Zip Code  
Grabill IN 46741-0127

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

Name of Employer Occupation  
Do It Best Corp. Ex. Vice Pres.

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 19 / 2007

Transaction ID: 71010.C11908

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Stephen Ham

Mailing Address 1250 Meadowbrook Dr

City State Zip Code  
Indianapolis IN 46240

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 02 / 2007

Transaction ID: 70926.C11713

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1450.00**

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

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 26 / 69                 |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 11d |
|  | <input type="checkbox"/> 13b            | <input type="checkbox"/> 14  |
|  |   | <input type="checkbox"/> 15  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

**A.** Full Name (Last, First, Middle Initial)  
Scott Harper

Mailing Address 934 Perry Woods Cove

City State Zip Code  
Fort Wayne IN 46845

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

Name of Employer Dalton Corp. Occupation Sales

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 07 / 2007

Transaction ID: 70926.C11731

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Stephen Hatch

Mailing Address 11605 Linden Grove Drive

City State Zip Code  
Fort Wayne IN 46845

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

Name of Employer Pain Management Associates Occupation Physician

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 17 / 2007

Transaction ID: 70926.C11799

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Thomas Herendeen

Mailing Address 13718 Hardisty Rd.

City State Zip Code  
Fort Wayne IN 46845

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

Name of Employer Retired Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 26 / 2007

Transaction ID: 70926.C11702

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>850.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |               |

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 27 / 69                 |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 11d |
|  | <input type="checkbox"/> 13b            | <input type="checkbox"/> 14  |
|  |   | <input type="checkbox"/> 15  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

**A.** Full Name (Last, First, Middle Initial)  
Thomas Herendeen

Mailing Address 13718 Hardisty Rd.

City State Zip Code  
Fort Wayne IN 46845

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

Name of Employer Retired Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 18 / 2007

Transaction ID: 71010.C11861

Amount of Each Receipt this Period  
200.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Larry Hochberg

Mailing Address 275 North Deere Park East

City State Zip Code  
Highland Park IL 60035

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

Name of Employer Sportmant Inc. Occupation CEO

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 18 / 2007

Transaction ID: 71010.C11821

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Diane Humphrey

Mailing Address 2279 E 250 N

City State Zip Code  
Bluffton IN 46714

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

Name of Employer Retired Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
450.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 07 / 2007

Transaction ID: 70926.C11728

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

|  |   |        |
|--|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 550.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |        |

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 28 / 69                 |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 11d |
|  | <input type="checkbox"/> 13b            | <input type="checkbox"/> 14  |
|  |   | <input type="checkbox"/> 15  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

**A.** Full Name (Last, First, Middle Initial)  
Diane Humphrey

Mailing Address 2279 E 250 N

City Bluffton State IN Zip Code 46714

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

Name of Employer Retired Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 700.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 18 / 2007

Transaction ID: 71010.C11882

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Thomas Irmscher

Mailing Address 10401 Mohawk Court

City Fort Wayne State IN Zip Code 46804

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

Name of Employer Irmscher Construction Occupation Contractor

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 13 / 2007

Transaction ID: 70926.C11758

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Michael Jaicomo

Mailing Address 75 Lake 205 C Jimmerson Lake

City Angola State IN Zip Code 46703-9427

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

Name of Employer Mannia Green, LLP Occupation CPA

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 03 / 2007

Transaction ID: 70926.C11714

Amount of Each Receipt this Period  
200.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **550.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 29 / 69                 |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 11d |
|  | <input type="checkbox"/> 13b            | <input type="checkbox"/> 14  |
|  |   | <input type="checkbox"/> 15  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Marna Johnson  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>09 / 20 / 2007   |  |
| Mailing Address 914 E. Gump Road  |  | Transaction ID: 71010.C11934   |  |
| City State Zip Code<br>Fort Wayne IN 46845  | Amount of Each Receipt this Period<br>500.00 |  |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |  |
| Name of Employer Occupation<br>Leisure Lawn Co-Owner  | Election Cycle-to-Date<br>1500.00            |  |  |
| Receipt For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |  |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Kevin Komin  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>08 / 02 / 2007   |  |
| Mailing Address 11118 Tangle Trail  |  | Transaction ID: 70926.C11708   |  |
| City State Zip Code<br>Fort Wayne IN 46845  | Amount of Each Receipt this Period<br>100.00 |  |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |  |
| Name of Employer Occupation<br>International Truck & Engine Purchasing  | Election Cycle-to-Date<br>400.00             |  |  |
| Receipt For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |  |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Kevin Komin  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>08 / 13 / 2007   |  |
| Mailing Address 11118 Tangle Trail  |  | Transaction ID: 70926.C11756   |  |
| City State Zip Code<br>Fort Wayne IN 46845  | Amount of Each Receipt this Period<br>100.00 |  |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |  |
| Name of Employer Occupation<br>International Truck & Engine Purchasing  | Election Cycle-to-Date<br>500.00             |  |  |
| Receipt For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 700.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |        |

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 30 / 69                 |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 11d |
|  | <input type="checkbox"/> 13b            | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 15             |                              |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

**A.** Full Name (Last, First, Middle Initial)  
Barbara Krisher

Mailing Address 3409 Rosewood Dr.

City State Zip Code  
Ft. Wayne IN 46804

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

Name of Employer Occupation  
Aboite Civil Township Township Trustee

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt  
MM / DD / YYYY  
08 / 13 / 2007

Transaction ID: 70926.C11766

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Michael Kubacki

Mailing Address 1401 E. North Shore Dr.

City State Zip Code  
Syracuse IN 46567

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

Name of Employer Occupation  
Lake City Bank President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt  
MM / DD / YYYY  
08 / 09 / 2007

Transaction ID: 70926.C11735

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Naveen Lal

Mailing Address 10625 Indian Ridge Drive

City State Zip Code  
Fort Wayne IN 46814

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

Name of Employer Occupation  
Allen County Cardiology M. D.

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt  
MM / DD / YYYY  
08 / 20 / 2007

Transaction ID: 70926.C11808

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

|  |   |        |
|--|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 700.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |        |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 31 / 69                 |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 11d |
|  | <input type="checkbox"/> 13b            | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 15             |                              |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

**A.** Full Name (Last, First, Middle Initial)  
Robert Liechty

Mailing Address PO Box 234

City State Zip Code  
Grabill IN 46741-0234

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

Name of Employer Retired Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 276.00

Date of Receipt  
MM / DD / YYYY  
08 / 09 / 2007

Transaction ID: 70926.C11743

Amount of Each Receipt this Period  
200.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Terry Jo Lightfoot

Mailing Address 9819 Gerig Rd.

City State Zip Code  
Leo IN 46765

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

Name of Employer Securance, Inc. Occupation Insurance Agent

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
08 / 17 / 2007

Transaction ID: 70926.C11805

Amount of Each Receipt this Period  
150.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Phil Malone

Mailing Address PO Box 141

City State Zip Code  
Howe IN 46746

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

Name of Employer Catalytica Energy Systems Occupation Dir Bus Dvlpmt, Govt Relations

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt  
MM / DD / YYYY  
08 / 20 / 2007

Transaction ID: 71011.C12001

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **450.00**

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

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 32 / 69                 |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 11d |
|  | <input type="checkbox"/> 13b            | <input type="checkbox"/> 14  |
|  |   | <input type="checkbox"/> 15  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

**A.** Full Name (Last, First, Middle Initial)  
Michael Mastrangelo

Mailing Address 7100 W. Hamilton Rd.

City State Zip Code  
Fort Wayne IN 46814

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

Name of Employer Retired Occupation Physician

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 17 / 2007

Transaction ID: 70926.C11801

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Beverly McArdle

Mailing Address 3530 Rosewood Dr.

City State Zip Code  
Fort Wayne IN 46804

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

Name of Employer Self Occupation Homemaker

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 17 / 2007

Transaction ID: 70926.C11806

Amount of Each Receipt this Period  
2300.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Alan McComb

Mailing Address 8707 Waterwood Ct.

City State Zip Code  
Fort Wayne IN 46804

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

Name of Employer Harold McComb & Sons, Inc Occupation President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2007

Transaction ID: 71010.C11968

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2900.00

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 33 / 69                 |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 11d |
|  | <input type="checkbox"/> 13b            | <input type="checkbox"/> 14  |
|  |   | <input type="checkbox"/> 15  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

**A.** Full Name (Last, First, Middle Initial)  
J. O. McNamee

Mailing Address 1077 Greenleaf Blvd. Apt 201

City State Zip Code  
Elkhart IN 46514

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

Name of Employer Retired Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 19 / 2007

Transaction ID: 71010.C11895

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Robert Melcher

Mailing Address 3311 W. 1175 N

City State Zip Code  
Decatur IN 46733

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

Name of Employer Retired Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 09 / 2007

Transaction ID: 70926.C11740

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
James Micali

Mailing Address 1 Parkway South

City State Zip Code  
Greenville SC 29615-5022

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

Name of Employer Michelin North America, Inc. Occupation Chairman and President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 23 / 2007

Transaction ID: 70926.C11699

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 1200.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 34 / 69                 |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 11d |
|  | <input type="checkbox"/> 13b            | <input type="checkbox"/> 14  |
|  |   | <input type="checkbox"/> 15  |

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NAME OF COMMITTEE (In Full)  
**SOUDER FOR CONGRESS, INC.**

**A.** Full Name (Last, First, Middle Initial)  
 Jane Miller

Mailing Address 12275 N Ogden Point Rd  
 Unit 112

City State Zip Code  
**Syracuse IN 46567-9700**

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ **2300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 27 / 2007**

**Transaction ID: 71010.C11995**

Amount of Each Receipt this Period  
**2300.00**

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
 Mary Louise Miller

Mailing Address 16 Stone Camp Trl.

City State Zip Code  
**Winona Lake IN 46590**

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

Name of Employer Self Occupation Race Car Owner

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ **1400.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 10 / 2007**

**Transaction ID: 70926.C11786**

Amount of Each Receipt this Period  
**500.00**

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
 Matt Miller

Mailing Address 3763 7th Rd

City State Zip Code  
**Bremen IN 46506**

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 10 / 2007**

**Transaction ID: 70926.C11785**

Amount of Each Receipt this Period  
**500.00**

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3300.00**

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

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 35 / 69                 |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 11d |
|  | <input type="checkbox"/> 13b            | <input type="checkbox"/> 14  |
|  |   | <input type="checkbox"/> 15  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

|   |   |  |  |
|---|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Matt Miller</b>  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>09 / 27 / 2007   |  |
| Mailing Address 3763 7th Rd   |   | Transaction ID: 71010.C11955   |  |
| City Bremen   | State IN  | Zip Code 46506   | Amount of Each Receipt this Period<br>500.00 |
| FEC ID number of contributing federal political committee. <b>C</b>   |   | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |  |
| Name of Employer Information Requested<br>Receipt For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Occupation Information Requested<br>Election Cycle-to-Date ▼<br>1100.00 |  |  |

|  |  |  |   |
|--|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. V. Miller</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>09 / 18 / 2007   |   |
| Mailing Address 12275 N. Ogden Point Rd.<br>Unit 112   |  | Transaction ID: 71010.C11922   |   |
| City Syracuse  | State IN   | Zip Code 46567-9731  | Amount of Each Receipt this Period<br>1000.00 |
| FEC ID number of contributing federal political committee. <b>C</b>  |  | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |   |
| Name of Employer MMM Invest. Inc.<br>Receipt For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Occupation President, CEO-CFO<br>Election Cycle-to-Date ▼<br>1000.00 |  |   |

|  |  |  |   |
|--|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. V. Miller</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>09 / 27 / 2007   |   |
| Mailing Address 12275 N. Ogden Point Rd.<br>Unit 112   |  | Transaction ID: 71010.C11994   |   |
| City Syracuse  | State IN   | Zip Code 46567-9731  | Amount of Each Receipt this Period<br>2300.00 |
| FEC ID number of contributing federal political committee. <b>C</b>  |  | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |   |
| Name of Employer MMM Invest. Inc.<br>Receipt For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Occupation President, CEO-CFO<br>Election Cycle-to-Date ▼<br>3300.00 |  |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 3800.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | _____   |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 36 / 69                 |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 11d |
|  | <input type="checkbox"/> 13b            | <input type="checkbox"/> 14  |
|  |   | <input type="checkbox"/> 15  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

**A.** Full Name (Last, First, Middle Initial)  
V. Miller

Mailing Address 12275 N. Ogden Point Rd.  
Unit 112

City State Zip Code  
Syracuse IN 46567-9731

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

Name of Employer Occupation  
MMM Invest. Inc. President, CEO-CFO

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 3300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2007

Transaction ID: 71013.C12006

Amount of Each Receipt this Period  
1000.00

Redesignation FROM Memo  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
V. Miller

Mailing Address 12275 N. Ogden Point Rd.  
Unit 112

City State Zip Code  
Syracuse IN 46567-9731

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

Name of Employer Occupation  
MMM Invest. Inc. President, CEO-CFO

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 3300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2007

Transaction ID: 71013.C12005

Amount of Each Receipt this Period  
-1000.00

Redesignation TO Memo  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Gene Mory

Mailing Address P. O. Box 37

City State Zip Code  
South Milford IN 46786

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

Name of Employer Occupation  
I.O. Mory, Inc. CEO

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 18 / 2007

Transaction ID: 71010.C11815

Amount of Each Receipt this Period  
200.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **200.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 37 / 69                 |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 11d |
|  | <input type="checkbox"/> 13b            | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 15             |                              |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

**A.** Full Name (Last, First, Middle Initial)  
Daniel Mulhern

Mailing Address 9312 Whippoorwill Dr.

City State Zip Code  
Fort Wayne IN 46809

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

Name of Employer Occupation  
WSI Gas & Equipment President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 07 / 2007

Transaction ID: 70926.C11718

Amount of Each Receipt this Period  
200.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
John Nelson

Mailing Address 5701 Oak Pointe Dr.

City State Zip Code  
Fort Wayne IN 46845

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

Name of Employer Occupation  
True North Strategic Advisors Business Consultant

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 13 / 2007

Transaction ID: 70926.C11764

Amount of Each Receipt this Period  
200.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Thomas Nusbaum

Mailing Address 1643 Woodfield Ct.

City State Zip Code  
Elkhart IN 46514

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

Name of Employer Occupation  
Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 19 / 2007

Transaction ID: 71010.C11906

Amount of Each Receipt this Period  
200.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

|  |   |        |
|--|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 600.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |        |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 38 / 69                 |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 11d |
|  | <input type="checkbox"/> 13b            | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 15             |                              |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

**A.** Full Name (Last, First, Middle Initial)  
John Pagin

Mailing Address 104 Wayne St.  
P. O. Box 86

City State Zip Code  
Howe IN 46746

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

Name of Employer Retired Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 07 / 2007

Transaction ID: 70926.C11717

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
John Pagin

Mailing Address 104 Wayne St.  
P. O. Box 86

City State Zip Code  
Howe IN 46746

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

Name of Employer Retired Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 20 / 2007

Transaction ID: 71010.C11936

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Jeffrey Pfeifer

Mailing Address 104 Maple St.

City State Zip Code  
Winona Lake IN 46590

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

Name of Employer Warsaw Community Church Occupation Pastor

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
230.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 07 / 2007

Transaction ID: 70926.C11721

Amount of Each Receipt this Period  
180.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>380.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |               |

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 39 / 69                 |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 11d |
|  | <input type="checkbox"/> 13b            | <input type="checkbox"/> 14  |
|  |   | <input type="checkbox"/> 15  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

**A.** Full Name (Last, First, Middle Initial)  
Jeffry Pfeifer

Mailing Address 104 Maple St.

City State Zip Code  
Winona Lake IN 46590

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

Name of Employer Occupation  
Warsaw Community Church Pastor

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 348.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 18 / 2007

Transaction ID: 71010.C11819

Amount of Each Receipt this Period  
118.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Sharon Pfister

Mailing Address 12531 Leo Rd.

City State Zip Code  
Fort Wayne IN 46845-9204

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

Name of Employer Occupation  
Agri-Traders Inc. Bookkeeper

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 22 / 2007

Transaction ID: 70926.C11774

Amount of Each Receipt this Period  
50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Sharon Pfister

Mailing Address 12531 Leo Rd.

City State Zip Code  
Fort Wayne IN 46845-9204

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

Name of Employer Occupation  
Agri-Traders Inc. Bookkeeper

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 325.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 18 / 2007

Transaction ID: 71010.C11820

Amount of Each Receipt this Period  
75.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>243.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |               |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 40 / 69                 |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 11d |
|  | <input type="checkbox"/> 13b            | <input type="checkbox"/> 14  |
|  |   | <input type="checkbox"/> 15  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

**A.** Full Name (Last, First, Middle Initial)  
Vivian Priddy

Mailing Address 1329 Latimer Ct.

City State Zip Code  
Fort Wayne IN 46825

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

Name of Employer Retired Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1600.00

Date of Receipt  
MM / DD / YYYY  
08 / 09 / 2007

Transaction ID: 70926.C11736

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Matt Prine

Mailing Address 4218 Saffron Drive

City State Zip Code  
Indianapolis IN 46237

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
09 / 18 / 2007

Transaction ID: 71010.C11893

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Thomas Quinn

Mailing Address 300 Massachusetts Ave, NW #221

City State Zip Code  
Washington DC 20001

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

Name of Employer Van Scoyoc Associates, Inc. Occupation Associate Vice President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
09 / 24 / 2007

Transaction ID: 71010.C11974

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 1500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |



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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 41 / 69                 |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 11d |
|  | <input type="checkbox"/> 13b            | <input type="checkbox"/> 14  |
|  |   | <input type="checkbox"/> 15  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

**A.** Full Name (Last, First, Middle Initial)  
Thomas Rayl

Mailing Address 6726 Pointe Inverness Way

City State Zip Code  
Fort Wayne IN 46804

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

Name of Employer Self Occupation Realtor

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2008.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 17 / 2007

Transaction ID: 70926.C11810

Amount of Each Receipt this Period  
200.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Steve Ringger

Mailing Address 2400 E 350 N

City State Zip Code  
Bluffton IN 46714

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

Name of Employer Honegger, Ringger, & Co. Occupation CPA

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2008.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 20 / 2007

Transaction ID: 71010.C11925

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Douglas Rose

Mailing Address PO Box 90175

City State Zip Code  
Indianapolis IN 46290

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

Name of Employer Irwin R. Rose & Co, Inc. Occupation President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1450.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 03 / 2007

Transaction ID: 70710.C11671

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **550.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 42 / 69                 |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 11d |
|  | <input type="checkbox"/> 13b            | <input type="checkbox"/> 14  |
|  |   | <input type="checkbox"/> 15  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

**A.** Full Name (Last, First, Middle Initial)  
Douglas Rose

Mailing Address PO Box 90175

City Indianapolis State IN Zip Code 46290

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

Name of Employer Irwin R. Rose & Co, Inc. Occupation President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2950.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2007

Transaction ID: 71010.C11983

Amount of Each Receipt this Period  
1500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Douglas Rose

Mailing Address PO Box 90175

City Indianapolis State IN Zip Code 46290

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

Name of Employer Irwin R. Rose & Co, Inc. Occupation President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2950.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2007

Transaction ID: 71013.C12008

Amount of Each Receipt this Period  
650.00

Redesignation FROM Memo  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Douglas Rose

Mailing Address PO Box 90175

City Indianapolis State IN Zip Code 46290

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

Name of Employer Irwin R. Rose & Co, Inc. Occupation President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2950.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2007

Transaction ID: 71013.C12007

Amount of Each Receipt this Period  
-650.00

Redesignation TO Memo  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 1500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 43 / 69                 |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 11d |
|  | <input type="checkbox"/> 13b            | <input type="checkbox"/> 14  |
|  |   | <input type="checkbox"/> 15  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

**A.** Full Name (Last, First, Middle Initial)  
Irwin Rose

Mailing Address 3831 Turtle Creek Blvd #25

City Dallas State TX Zip Code 75219

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2007

Transaction ID: 71010.C11982

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Judy Ross

Mailing Address 2424 Peddlers Villiage Rd.

City Goshen State IN Zip Code 46528-5778

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

Name of Employer Self Occupation Chiropractor

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 19 / 2007

Transaction ID: 71010.C11907

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Patrick Sprunger

Mailing Address 5915 Heywood Cove

City Fort Wayne State IN Zip Code 46815

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

Name of Employer Simplex Grinnell Occupation Sales

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 22 / 2007

Transaction ID: 70926.C11768

Amount of Each Receipt this Period  
200.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>700.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |               |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 44 / 69                 |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 11d |
|  | <input type="checkbox"/> 13b            | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 15             |                              |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

**A.** Full Name (Last, First, Middle Initial)  
Paul Steiner

Mailing Address 1825 Florida Dr.

City State Zip Code  
Fort Wayne IN 46805

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

Name of Employer Retired Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 17 / 2007

Transaction ID: 70926.C11804

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Phillip Stettner

Mailing Address 1780 N. 450 East

City State Zip Code  
Bluffton IN 46714

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

Name of Employer Self Occupation Minister

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 800.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 07 / 2007

Transaction ID: 70926.C11726

Amount of Each Receipt this Period  
300.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Phillip Stettner

Mailing Address 1780 N. 450 East

City State Zip Code  
Bluffton IN 46714

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

Name of Employer Self Occupation Minister

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 900.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 24 / 2007

Transaction ID: 71010.C11940

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **500.00**

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

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 45 / 69                 |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 11d |
|  | <input type="checkbox"/> 13b            | <input type="checkbox"/> 14  |
|  |   | <input type="checkbox"/> 15  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

**A.** Full Name (Last, First, Middle Initial)  
Imogene Stieglitz

Mailing Address 7529 Westerlin Dr.

City State Zip Code  
Woodburn IN 46797

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 425.00

Date of Receipt  
MM / DD / YYYY  
08 / 16 / 2007

Transaction ID: 70926.C11796

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Lavada Stieglitz

Mailing Address 7529 Westerlin Dr.

City State Zip Code  
Woodburn IN 46797-9722

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 425.00

Date of Receipt  
MM / DD / YYYY  
08 / 16 / 2007

Transaction ID: 70926.C11797

Amount of Each Receipt this Period  
125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Joanne Stoller

Mailing Address 2501 Kingston Pointe

City State Zip Code  
Fort Wayne IN 46815

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

Name of Employer Stollers Inc. Occupation Co-Owner

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
09 / 20 / 2007

Transaction ID: 71010.C11938

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **750.00**

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

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 46 / 69                 |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 11d |
|  | <input type="checkbox"/> 13b            | <input type="checkbox"/> 14  |
|  |   | <input type="checkbox"/> 15  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

**A.** Full Name (Last, First, Middle Initial)  
Christy Stutzman

Mailing Address 250 W 600 N

City State Zip Code  
Howe IN 46746

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

Name of Employer  
Self Employed

Occupation  
Speech Writer/Sales

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt  
MM / DD / YYYY  
09 / 18 / 2007

Transaction ID: 71010.C11892

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Fred W. Toenges

Mailing Address 5219 Hickory Lane

City State Zip Code  
Fort Wayne IN 46845-9648

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

Name of Employer  
FW Toenges & Sons, Inc.

Occupation  
certified podiatrist

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2007

Transaction ID: 70926.C11780

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Raymond Treen

Mailing Address 5211 Wyndemere Ct.

City State Zip Code  
Fort Wayne IN 46835

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

Name of Employer  
Do It Best Corp.

Occupation  
Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt  
MM / DD / YYYY  
08 / 09 / 2007

Transaction ID: 70926.C11748

Amount of Each Receipt this Period  
200.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 1200.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 47 / 69                 |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 11d |
|  | <input type="checkbox"/> 13b            | <input type="checkbox"/> 14  |
|  |   | <input type="checkbox"/> 15  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

**A.** Full Name (Last, First, Middle Initial)  
Gerald A. Trolz

Mailing Address 3714 Bent Oak Trail

City State Zip Code  
Elkhart IN 46517-3871

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 19 / 2007

Transaction ID: 71010.C11894

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Kenneth Truman

Mailing Address P.O. Box 914

City State Zip Code  
Warsaw IN 46581-0914

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

Name of Employer Retired Occupation Retail Business Owner

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 19 / 2007

Transaction ID: 70926.C11691

Amount of Each Receipt this Period  
400.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Kenneth Truman

Mailing Address P.O. Box 914

City State Zip Code  
Warsaw IN 46581-0914

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

Name of Employer Retired Occupation Retail Business Owner

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 800.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 18 / 2007

Transaction ID: 71010.C11866

Amount of Each Receipt this Period  
400.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1050.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 48 / 69                 |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 11d |
|  | <input type="checkbox"/> 13b            | <input type="checkbox"/> 14  |
|  |   | <input type="checkbox"/> 15  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Terry Tucker</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>09 / 10 / 2007  |  |
| Mailing Address<br>Maple Leaf Farms<br>P. O. Box 308  |  | <b>Transaction ID: 70926.C11784</b>   |  |
| City State Zip Code<br>Milford IN 46542   |  | Amount of Each Receipt this Period<br>50.00   |  |
| FEC ID number of contributing federal political committee.<br>C   |  | Receipt<br><input checked="" type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |  |
| Name of Employer Occupation<br>Maple Leaf Farms Business Executive  |  |   |  |
| Receipt For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Election Cycle-to-Date ▼<br>1050.00   |  |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. David Tudor</b>  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>09 / 26 / 2007   |  |
| Mailing Address<br>P.O. Box 1775  |  | <b>Transaction ID: 71010.C11964</b>  |  |
| City State Zip Code<br>Noblesville IN 46061   |  | Amount of Each Receipt this Period<br>250.00   |  |
| FEC ID number of contributing federal political committee.<br>C   |  | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |  |
| Name of Employer Occupation<br>Self Attorney  |  |  |  |
| Receipt For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Election Cycle-to-Date ▼<br>250.00   |  |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Mark Wickersham</b>  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>08 / 09 / 2007   |  |
| Mailing Address<br>7930 N 300 W   |  | <b>Transaction ID: 70926.C11742</b>  |  |
| City State Zip Code<br>Huntington IN 46750  |  | Amount of Each Receipt this Period<br>150.00   |  |
| FEC ID number of contributing federal political committee.<br>C   |  | Receipt<br><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |  |
| Name of Employer Occupation<br>IEDC Economic Developer  |  |  |  |
| Receipt For: 2008<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Election Cycle-to-Date ▼<br>500.00   |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 450.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |        |



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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 49 / 69                 |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 11d |
|  | <input type="checkbox"/> 13b            | <input type="checkbox"/> 14  |
|  |   | <input type="checkbox"/> 15  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

**A.** Full Name (Last, First, Middle Initial)  
Mark Wickersham

Mailing Address 7930 N 300 W

City State Zip Code  
Huntington IN 46750

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

Name of Employer IEDC Occupation Economic Developer

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2007

Transaction ID: 71010.C11914

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Clifford Wieland

Mailing Address 8157 Constitution Dr.

City State Zip Code  
Syracuse IN 46567

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

Name of Employer Wieland Designs Inc. Occupation Corporate Executive

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
09 / 18 / 2007

Transaction ID: 71010.C11868

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Velma Williams

Mailing Address 10617 Lake Pointe Dr.

City State Zip Code  
Fort Wayne IN 46845-6408

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

Name of Employer Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
08 / 16 / 2007

Transaction ID: 70926.C11798

Amount of Each Receipt this Period  
200.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **700.00**

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

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 50 / 69                 |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 11d |
|  | <input type="checkbox"/> 13b            | <input type="checkbox"/> 14  |
|  |   | <input type="checkbox"/> 15  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

**A.** Full Name (Last, First, Middle Initial)  
Donald Williamson

Mailing Address 6515 E. Canal Pt. Ln.

City State Zip Code  
Fort Wayne IN 46804

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

Name of Employer Self Occupation Wealth Manager

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 220.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 09 / 2007

Transaction ID: 70926.C11749

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
James Winebrenner

Mailing Address PO Box 8484

City State Zip Code  
Fort Wayne IN 46898

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

Name of Employer Shust Engineering, Inc. Occupation Contractor

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 18 / 2007

Transaction ID: 71010.C11873

Amount of Each Receipt this Period  
200.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Don Wolf

Mailing Address 11718 Autumn Tree Dr.

City State Zip Code  
Fort Wayne IN 46845

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

Name of Employer Retired Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 07 / 2007

Transaction ID: 71011.C12000

Amount of Each Receipt this Period  
200.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

|  |   |        |
|--|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |        |

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

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             | PAGE 51 / 69                 |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                      | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 11d   | <input type="checkbox"/> 12  | <input type="checkbox"/> 13a |
| <input type="checkbox"/> 13b   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

**A.** Full Name (Last, First, Middle Initial)  
Mike Yoder

Mailing Address 59520 County Road 31

City State Zip Code  
Middlebury IN 46540

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

Name of Employer Occupation  
Crystal Valley Dairy Farms Owner

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2007

Transaction ID: 71010.C11920

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Wendy Zent

Mailing Address 12120 Burning Tree Rd.

City State Zip Code  
Fort Wayne IN 46845

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

Name of Employer Occupation  
Endodontic Assoc., Inc. Office

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
MM / DD / YYYY  
08 / 17 / 2007

Transaction ID: 70926.C11803

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

|  |                 |
|--|-----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>350.00</b>   |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <b>35423.00</b> |

# 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)

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|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Acme Printing Inc.</b>  |  | <b>Transaction ID: 71010.E3814</b><br>Date of Disbursement<br>08 / 20 / 2007  |  |
| Mailing Address 632 W. Superior  |  | Amount of Each Disbursement this Period<br>711.26   |  |
| City Fort Wayne<br>State IN<br>Zip Code 46802-1092   | Purpose of Disbursement<br>Printing<br>Candidate Name  | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br><br>003<br>Category/<br>Type |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br><br>PRINTING |   |  |

|  |   |   |  |
|--|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. AT&amp;T</b>  |   | <b>Transaction ID: 70710.E3781</b><br>Date of Disbursement<br>07 / 05 / 2007  |  |
| Mailing Address P. O. Box 9001310  |   | Amount of Each Disbursement this Period<br>27.01  |  |
| City Louisville<br>State KY<br>Zip Code 40290-   | Purpose of Disbursement<br>Phone<br>Candidate Name  | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br><br>001<br>Category/<br>Type |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br><br>PHONE |   |  |

|  |   |   |  |
|--|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. AT&amp;T</b>  |   | <b>Transaction ID: 71010.E3819</b><br>Date of Disbursement<br>09 / 11 / 2007  |  |
| Mailing Address P. O. Box 9001310  |   | Amount of Each Disbursement this Period<br>53.82  |  |
| City Louisville<br>State KY<br>Zip Code 40290-   | Purpose of Disbursement<br>Phone<br>Candidate Name  | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br><br>001<br>Category/<br>Type |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br><br>PHONE |   |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 792.09 |
| <b>TOTAL</b> 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)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Conservative Victory Fund</b>  |  | <b>Transaction ID:</b> 70926.C11694IK<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 8 / 0 1 / 2 0 0 7 |
| Mailing Address P.O. Box 15245<br>Capitol Hill  |  | Amount of Each Disbursement this Period<br>414.30   |
| City Washington State DC Zip Code 20003-  | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53                                  |   |
| Purpose of Disbursement<br>Event Announcement   | Category/Type<br>003   | IN KIND: EVENT ANNOUNCEMENT   |
| Candidate Name  | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District:   |   |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Jessica Howell</b>   |  | <b>Transaction ID:</b> 70710.E3778<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 7 / 0 5 / 2 0 0 7 |
| Mailing Address 1930 W SR 26  |  | Amount of Each Disbursement this Period<br>508.74  |
| City Portland State IN Zip Code 47371-  | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53                                  |  |
| Purpose of Disbursement<br>Payroll  | Category/Type<br>001   | PAYROLL  |
| Candidate Name  | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District:   |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Jessica Howell</b>   |  | <b>Transaction ID:</b> 70926.E3806<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 8 / 0 6 / 2 0 0 7 |
| Mailing Address 1930 W SR 26  |  | Amount of Each Disbursement this Period<br>21.19   |
| City Portland State IN Zip Code 47371-  | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53                                  |  |
| Purpose of Disbursement<br>Envelopes  | Category/Type<br>003   | ENVELOPES  |
| Candidate Name  | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District:   |  |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 944.23      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

|  |  |  |  |
|--|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Jessica Howell</b>  |  | Transaction ID: 70926.E3805<br>Date of Disbursement<br>08 / 06 / 2007  |  |
| Mailing Address 1930 W SR 26   |  | Amount of Each Disbursement this Period<br>537.54  |  |
| City Portland<br>State IN<br>Zip Code 47371-   | Purpose of Disbursement<br>Payroll<br>Candidate Name   | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br>PAYROLL |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State:           District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/Type<br>001   |  |

|  |  |  |  |
|--|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Jessica Howell</b>  |  | Transaction ID: 71010.E3820<br>Date of Disbursement<br>09 / 14 / 2007  |  |
| Mailing Address 1930 W SR 26   |  | Amount of Each Disbursement this Period<br>268.84  |  |
| City Portland<br>State IN<br>Zip Code 47371-   | Purpose of Disbursement<br>Payroll<br>Candidate Name   | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br>PAYROLL |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State:           District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/Type<br>001   |  |

|  |  |  |  |
|--|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Indiana Dept. of Revenue</b>  |  | Transaction ID: 70926.E3804<br>Date of Disbursement<br>07 / 30 / 2007  |  |
| Mailing Address 100 N Senate Ave.  |  | Amount of Each Disbursement this Period<br>155.01  |  |
| City Indianapolis<br>State IN<br>Zip Code 46204-2253   | Purpose of Disbursement<br>Payroll Taxes<br>Candidate Name   | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br>PAYROLL TAXES |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State:           District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Category/Type<br>001   |  |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 961.39      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Mike Gula &amp; Associates</b>  |  | <b>Transaction ID: 70710.E3783</b><br>Date of Disbursement<br>07 / 05 / 2007 |
| Mailing Address 700 12th St. NW<br>Suite 700   |  | Amount of Each Disbursement this Period<br>9977.94                           |
| City Washington State DC Zip Code 20005-   | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53                            |  |
| Purpose of Disbursement Fundraising<br>Candidate Name  | 003<br>Category/Type   | FUNDRAISING  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Mike Gula &amp; Associates</b>  |  | <b>Transaction ID: 71010.E3815</b><br>Date of Disbursement<br>08 / 21 / 2007 |
| Mailing Address 700 12th St. NW<br>Suite 700   |  | Amount of Each Disbursement this Period<br>5160.00                           |
| City Washington State DC Zip Code 20005-   | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53                            |  |
| Purpose of Disbursement Fundraising<br>Candidate Name  | 003<br>Category/Type   | FUNDRAISING  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. National City Bank</b>  |  | <b>Transaction ID: 70926.E3793</b><br>Date of Disbursement<br>07 / 20 / 2007 |
| Mailing Address One National City Center<br>101 W Washington STE 335 E   |  | Amount of Each Disbursement this Period<br>399.75                            |
| City Indianapolis State IN Zip Code 46255-   | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53                            |  |
| Purpose of Disbursement See Below<br>Candidate Name  | 001<br>Category/Type   | SEE BELOW  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  |

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 15537.69 |
| <b>TOTAL</b> 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)

|                                     |     |                          |     |                          |     |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17  | <input type="checkbox"/> | 18  | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/>            | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. AOL Online</b>  |  | Transaction ID: 70926.E3794<br>Date of Disbursement<br>07 / 20 / 2007 |  |
| Mailing Address One Time Warner Center   |  | Amount of Each Disbursement this Period<br>25.90                      |  |
| City New York<br>State NY<br>Zip Code 10019-   | Purpose of Disbursement<br>Internet<br>Candidate Name  | Category/Type<br>001  |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

**[MEMO ITEM]**  
MEMO: INTERNET

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Allen Co Republican Central Co</b>  |  | Transaction ID: 70926.E3798<br>Date of Disbursement<br>07 / 20 / 2007 |  |
| Mailing Address PO Box 11014   |  | Amount of Each Disbursement this Period<br>200.00                     |  |
| City Fort Wayne<br>State IN<br>Zip Code 46855-   | Purpose of Disbursement<br>Lincoln Day<br>Candidate Name   | Category/Type<br>011  |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

**[MEMO ITEM]**  
MEMO: LINCOLN DAY

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. FedEx Kinkos</b>  |  | Transaction ID: 70926.E3795<br>Date of Disbursement<br>07 / 20 / 2007 |  |
| Mailing Address 423 W Coliseum   |  | Amount of Each Disbursement this Period<br>7.63                       |  |
| City Fort Wayne<br>State IN<br>Zip Code 46805-1010   | Purpose of Disbursement<br>Mailing<br>Candidate Name   | Category/Type<br>001  |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

**[MEMO ITEM]**  
MEMO: MAILING

|  |      |
|--|------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | 0.00 |
| <b>TOTAL</b> 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)

|                                     |     |                          |     |                          |     |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17  | <input type="checkbox"/> | 18  | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/>            | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. FedEx Kinkos</b>  |  | Transaction ID: 70926.E3796<br>Date of Disbursement<br>07 / 20 / 2007 |  |
| Mailing Address 423 W Coliseum   |  | Amount of Each Disbursement this Period<br>38.37                      |  |
| City Fort Wayne<br>State IN<br>Zip Code 46805-1010   | Purpose of Disbursement<br>Mailings<br>Candidate Name  | 001<br>Category/<br>Type  |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

**[MEMO ITEM]**  
MEMO: MAILINGS

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Hostway.com</b>   |  | Transaction ID: 70926.E3797<br>Date of Disbursement<br>07 / 20 / 2007 |  |
| Mailing Address 1 North State St.<br>Suite 1200  |  | Amount of Each Disbursement this Period<br>74.85                      |  |
| City Chicago<br>State IL<br>Zip Code 60602-  | Purpose of Disbursement<br>Webhosting<br>Candidate Name  | 003<br>Category/<br>Type  |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

**[MEMO ITEM]**  
MEMO: WEBHOSTING

|  |  |   |  |
|--|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Verizon Wireless</b>  |  | Transaction ID: 70926.E3799<br>Date of Disbursement<br>07 / 20 / 2007 |  |
| Mailing Address P.O. Box 9058  |  | Amount of Each Disbursement this Period<br>53.00                      |  |
| City Dublin<br>State OH<br>Zip Code 43017-   | Purpose of Disbursement<br>Phone<br>Candidate Name   | 001<br>Category/<br>Type  |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

**[MEMO ITEM]**  
MEMO: PHONE

|  |      |
|--|------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 0.00 |
| <b>TOTAL</b> 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)

|                                     |     |                          |     |                          |     |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17  | <input type="checkbox"/> | 18  | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/>            | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. National City Bank</b>  |  | Transaction ID: 71010.E3808<br>Date of Disbursement<br>08 / 20 / 2007 |
| Mailing Address One National City Center<br>101 W Washington STE 335 E   |  | Amount of Each Disbursement this Period<br>224.04                     |
| City Indianapolis State IN Zip Code 46255-   | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53                            |   |
| Purpose of Disbursement See Below<br>Candidate Name  | 001<br>Category/Type   | SEE BELOW   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. AOL Online</b>  |  | Transaction ID: 71010.E3810<br>Date of Disbursement<br>08 / 20 / 2007 |
| Mailing Address One Time Warner Center   |  | Amount of Each Disbursement this Period<br>25.90                      |
| City New York State NY Zip Code 10019-   | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53                            |   |
| Purpose of Disbursement Internet<br>Candidate Name   | 001<br>Category/Type   | <b>[MEMO ITEM]</b><br>MEMO: INTERNET                                  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. US Postal Service</b>   |  | Transaction ID: 71010.E3809<br>Date of Disbursement<br>08 / 20 / 2007 |
| Mailing Address 1501 S. Clinton  |  | Amount of Each Disbursement this Period<br>82.00                      |
| City Fort Wayne State IN Zip Code 46805-   | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53                            |   |
| Purpose of Disbursement Postage<br>Candidate Name  | 001<br>Category/Type   | <b>[MEMO ITEM]</b><br>MEMO: POSTAGE                                   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 224.04      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# 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)

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|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

**A.** US Postal Service

Full Name (Last, First, Middle Initial)

Mailing Address 1501 S. Clinton

City Fort Wayne State IN Zip Code 46805-

Purpose of Disbursement Postage

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 71010.E3812

Date of Disbursement

/   /

Amount of Each Disbursement this Period

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: POSTAGE

**B.** National City Bank

Full Name (Last, First, Middle Initial)

Mailing Address One National City Center  
101 W Washington STE 335 E

City Indianapolis State IN Zip Code 46255-

Purpose of Disbursement See Below

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 71010.E3821

Date of Disbursement

/   /

Amount of Each Disbursement this Period

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SEE BELOW

**C.** AOL Online

Full Name (Last, First, Middle Initial)

Mailing Address One Time Warner Center

City New York State NY Zip Code 10019-

Purpose of Disbursement Internet

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 71010.E3823

Date of Disbursement

/   /

Amount of Each Disbursement this Period

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: INTERNET

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

**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)

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|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

|  |   |   |  |
|--|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Allen Co Republican Central Co</b>  |   | Transaction ID: 71010.E3822<br>Date of Disbursement<br>09 / 19 / 2007 |  |
| Mailing Address PO Box 11014   |   | Amount of Each Disbursement this Period<br>50.00                      |  |
| City Fort Wayne<br>State IN<br>Zip Code 46855-   | Purpose of Disbursement<br>Advertising<br>Candidate Name  | Category/Type<br>004  |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

**[MEMO ITEM]**  
MEMO: ADVERTISING

|  |   |   |  |
|--|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Don Halls Guesthouse</b>  |   | Transaction ID: 71010.E3829<br>Date of Disbursement<br>09 / 19 / 2007 |  |
| Mailing Address 1313 W Washington Center Rd  |   | Amount of Each Disbursement this Period<br>609.38                     |  |
| City Fort Wayne<br>State IN<br>Zip Code 46825-   | Purpose of Disbursement<br>Rental/Catering<br>Candidate Name  | Category/Type<br>003  |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

**[MEMO ITEM]**  
MEMO: RENTAL/CATERING

|  |   |   |  |
|--|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. National City Bank</b>  |   | Transaction ID: 71010.E3831<br>Date of Disbursement<br>09 / 19 / 2007 |  |
| Mailing Address One National City Center<br>101 W Washington STE 335 E   |   | Amount of Each Disbursement this Period<br>11.90                      |  |
| City Indianapolis<br>State IN<br>Zip Code 46255-   | Purpose of Disbursement<br>Bank Fee<br>Candidate Name   | Category/Type<br>001  |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |  |

**[MEMO ITEM]**  
MEMO: BANK FEE

|  |       |
|--|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 0.00  |
| <b>TOTAL</b> 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)

|                                     |     |                          |     |                          |     |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17  | <input type="checkbox"/> | 18  | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/>            | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

|  |  |   |   |
|--|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Office Depot</b>  |  | Transaction ID: 71010.E3825<br>Date of Disbursement<br>09 / 19 / 2007 |   |
| Mailing Address 705 Northcrest Shopping Center   |  | Amount of Each Disbursement this Period<br>73.45                      |   |
| City Fort Wayne<br>State IN<br>Zip Code 46805-   | Purpose of Disbursement<br>Office Supplies<br>Candidate Name   | 001<br>Category/<br>Type  | <input type="checkbox"/> Refund or Disposal of Excess<br>Contributions Required Under<br>11 C.F.R. 400.53 |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <b>[MEMO ITEM]</b><br>MEMO: OFFICE SUPPLIES                           |   |

|  |  |   |   |
|--|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. US Postal Service</b>   |  | Transaction ID: 71010.E3824<br>Date of Disbursement<br>09 / 19 / 2007 |   |
| Mailing Address 1501 S. Clinton  |  | Amount of Each Disbursement this Period<br>123.00                     |   |
| City Fort Wayne<br>State IN<br>Zip Code 46805-   | Purpose of Disbursement<br>Postage<br>Candidate Name   | 001<br>Category/<br>Type  | <input type="checkbox"/> Refund or Disposal of Excess<br>Contributions Required Under<br>11 C.F.R. 400.53 |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <b>[MEMO ITEM]</b><br>MEMO: POSTAGE                                   |   |

|  |  |   |   |
|--|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Verizon Wireless</b>  |  | Transaction ID: 71010.E3826<br>Date of Disbursement<br>09 / 19 / 2007 |   |
| Mailing Address P.O. Box 9058  |  | Amount of Each Disbursement this Period<br>53.00                      |   |
| City Dublin<br>State OH<br>Zip Code 43017-   | Purpose of Disbursement<br>Phone<br>Candidate Name   | 001<br>Category/<br>Type  | <input type="checkbox"/> Refund or Disposal of Excess<br>Contributions Required Under<br>11 C.F.R. 400.53 |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <b>[MEMO ITEM]</b><br>MEMO: PHONE                                     |   |

|  |       |
|--|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 0.00  |
| <b>TOTAL</b> 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)

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|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. NPC</b>   |   | Transaction ID: 71010.E3848<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 02 / 2007          |
| Mailing Address 1231 Durrett Lane  |   | Amount of Each Disbursement this Period<br>28.20  |
| City Louisville State KY Zip Code 40213-   | Purpose of Disbursement<br>Merchant Fee<br>Candidate Name |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |   | Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br><br><b>MERCHANT FEE</b> |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼    |   |   |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. NPC</b>   |  | Transaction ID: 71010.E3845<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 03 / 2007             |
| Mailing Address 1231 Durrett Lane  |  | Amount of Each Disbursement this Period<br>3.71  |
| City Louisville State KY Zip Code 40213-   | Purpose of Disbursement<br>Credit Card Fee<br>Candidate Name |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |  | Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br><br><b>CREDIT CARD FEE</b> |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼    |  |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. NPC</b>   |  | Transaction ID: 71010.E3846<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 09 / 2007             |
| Mailing Address 1231 Durrett Lane  |  | Amount of Each Disbursement this Period<br>4.94  |
| City Louisville State KY Zip Code 40213-   | Purpose of Disbursement<br>Credit Card Fee<br>Candidate Name |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: |  | Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br><br><b>CREDIT CARD FEE</b> |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼    |  |  |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 36.85       |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

**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)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. NPC</b>  |  | Transaction ID: 71010.E3847<br>Date of Disbursement<br>07 / 16 / 2007 |
| Mailing Address 1231 Durrett Lane   |  | Amount of Each Disbursement this Period<br>0.62                       |
| City Louisville      State KY      Zip Code 40213-  | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53                            |   |
| Purpose of Disbursement<br>Credit Card Fee  | Candidate Name   | CREDIT CARD FEE   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State:      District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. NPC</b>  |  | Transaction ID: 71010.E3852<br>Date of Disbursement<br>08 / 02 / 2007 |
| Mailing Address 1231 Durrett Lane   |  | Amount of Each Disbursement this Period<br>33.50                      |
| City Louisville      State KY      Zip Code 40213-  | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53                            |   |
| Purpose of Disbursement<br>Merchant Fee   | Candidate Name   | MERCHANT FEE  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State:      District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. NPC</b>  |  | Transaction ID: 71010.E3849<br>Date of Disbursement<br>08 / 08 / 2007 |
| Mailing Address 1231 Durrett Lane   |  | Amount of Each Disbursement this Period<br>0.62                       |
| City Louisville      State KY      Zip Code 40213-  | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53                            |   |
| Purpose of Disbursement<br>Credit Card Fee  | Candidate Name   | CREDIT CARD FEE   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State:      District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|  |       |
|--|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 34.74 |
| <b>TOTAL</b> 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)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. NPC</b>  |  | Transaction ID: 71010.E3850<br>Date of Disbursement<br>08 / 15 / 2007 |
| Mailing Address 1231 Durrett Lane   |  | Amount of Each Disbursement this Period<br>1.61                       |
| City Louisville      State KY      Zip Code 40213-  | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53                                  |   |
| Purpose of Disbursement<br>Credit Card Fee  |  | 001<br>Category/<br>Type  |
| Candidate Name  | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State:      District:  |   |

**CREDIT CARD FEE**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. NPC</b>  |  | Transaction ID: 71010.E3851<br>Date of Disbursement<br>08 / 23 / 2007 |
| Mailing Address 1231 Durrett Lane   |  | Amount of Each Disbursement this Period<br>2.47                       |
| City Louisville      State KY      Zip Code 40213-  | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53                                  |   |
| Purpose of Disbursement<br>Credit Card Fee  |  | 001<br>Category/<br>Type  |
| Candidate Name  | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State:      District:  |   |

**CREDIT CARD FEE**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. NPC</b>  |  | Transaction ID: 71010.E3854<br>Date of Disbursement<br>09 / 04 / 2007 |
| Mailing Address 1231 Durrett Lane   |  | Amount of Each Disbursement this Period<br>37.69                      |
| City Louisville      State KY      Zip Code 40213-  | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53                                  |   |
| Purpose of Disbursement<br>Merchant Fees  |  | 001<br>Category/<br>Type  |
| Candidate Name  | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State:      District:  |   |

**MERCHANT FEES**

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 41.77       |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |



**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 65 / 69

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. NPC</b>   |  | <b>Transaction ID:</b> 71010.E3853<br><b>Date of Disbursement</b><br>09 / 21 / 2007 |
| Mailing Address 1231 Durrett Lane  |  | Amount of Each Disbursement this Period<br>4.72                                     |
| City Louisville State KY Zip Code 40213-   | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53                            |   |
| Purpose of Disbursement Credit Card Fee<br>Candidate Name  | Category/Type<br>001   | <b>CREDIT CARD FEE</b>  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Country Shops of Grabill</b>  |  | <b>Transaction ID:</b> 70926.E3791<br><b>Date of Disbursement</b><br>07 / 20 / 2007 |
| Mailing Address PO Box 429<br>13804 Antwerp Rd.  |  | Amount of Each Disbursement this Period<br>150.00                                   |
| City Grabill State IN Zip Code 46741-  | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53                            |   |
| Purpose of Disbursement Rent<br>Candidate Name   | Category/Type<br>001   | <b>RENT</b>   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. SCM Associates</b>  |  | <b>Transaction ID:</b> 70710.E3782<br><b>Date of Disbursement</b><br>07 / 05 / 2007 |
| Mailing Address 1283 Main Street   |  | Amount of Each Disbursement this Period<br>6831.01                                  |
| City Dublin State NH Zip Code 03444-0254   | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53                            |   |
| Purpose of Disbursement Mailings<br>Candidate Name   | Category/Type<br>003   | <b>MAILINGS</b>   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <b>6985.73</b> |
| <b>TOTAL</b> 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)

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|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Tazian Properties</b>   |  | <b>Transaction ID:</b> 70710.E3779<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 7 / 0 5 / 2 0 0 7 |
| Mailing Address 10104 Woodland Plaza Cove  |  | Amount of Each Disbursement this Period<br>500.00   |
| City Fort Wayne State IN Zip Code 46825-   | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53                            |   |
| Purpose of Disbursement Rent<br>Candidate Name   | Category/Type<br>001   | RENT  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Tazian Properties</b>   |  | <b>Transaction ID:</b> 70926.E3801<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 7 / 3 0 / 2 0 0 7 |
| Mailing Address 10104 Woodland Plaza Cove  |  | Amount of Each Disbursement this Period<br>500.00   |
| City Fort Wayne State IN Zip Code 46825-   | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53                            |   |
| Purpose of Disbursement Rent<br>Candidate Name   | Category/Type<br>001   | RENT  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Tazian Properties</b>   |  | <b>Transaction ID:</b> 71010.E3816<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 9 / 1 1 / 2 0 0 7 |
| Mailing Address 10104 Woodland Plaza Cove  |  | Amount of Each Disbursement this Period<br>500.00   |
| City Fort Wayne State IN Zip Code 46825-   | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53                            |   |
| Purpose of Disbursement Rent<br>Candidate Name   | Category/Type<br>001   | RENT  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 1500.00 |
| <b>TOTAL</b> 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)

|                                     |     |                          |     |                          |     |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17  | <input type="checkbox"/> | 18  | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/>            | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

**A. United States Treasury**

Full Name (Last, First, Middle Initial)  
United States Treasury

Mailing Address PO Box 6796

City Chicago State IL Zip Code 60680-6796

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 70926.E3803

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | / | 3 | 0 | / | 2 | 0 | 7 | 7 |

Amount of Each Disbursement this Period

|        |
|--------|
| 638.02 |
|--------|

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

PAYROLL TAXES

|     |
|-----|
| 001 |
|-----|

Category/  
Type

**B. Verizon**

Full Name (Last, First, Middle Initial)  
Verizon

Mailing Address P.O. Box 31122

City Tampa State FL Zip Code 33631-3122

Purpose of Disbursement  
Phone

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 70710.E3780

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | / | 0 | 5 | / | 2 | 0 | 7 | 7 |

Amount of Each Disbursement this Period

|       |
|-------|
| 46.57 |
|-------|

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

PHONE

|     |
|-----|
| 001 |
|-----|

Category/  
Type

**C. Verizon**

Full Name (Last, First, Middle Initial)  
Verizon

Mailing Address P.O. Box 31122

City Tampa State FL Zip Code 33631-3122

Purpose of Disbursement  
Phone

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 70926.E3792

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | / | 2 | 0 | / | 2 | 0 | 7 | 7 |

Amount of Each Disbursement this Period

|        |
|--------|
| 242.23 |
|--------|

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

PHONE

|     |
|-----|
| 001 |
|-----|

Category/  
Type

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

926.82

**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)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Verizon</b>   |  | <b>Transaction ID: 70926.E3800</b><br>Date of Disbursement<br>MM / DD / YYYY<br>07 / 30 / 2007 |
| Mailing Address P.O. Box 31122   |  | Amount of Each Disbursement this Period<br>46.54   |
| City Tampa State FL Zip Code 33631-3122  | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53                            |  |
| Purpose of Disbursement<br>Phone<br>Candidate Name   | Category/Type<br>001   | PHONE  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Verizon</b>   |  | <b>Transaction ID: 71010.E3813</b><br>Date of Disbursement<br>MM / DD / YYYY<br>08 / 20 / 2007 |
| Mailing Address P.O. Box 31122   |  | Amount of Each Disbursement this Period<br>241.68  |
| City Tampa State FL Zip Code 33631-3122  | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53                            |  |
| Purpose of Disbursement<br>Phone<br>Candidate Name   | Category/Type<br>001   | PHONE  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Verizon</b>   |  | <b>Transaction ID: 71010.E3818</b><br>Date of Disbursement<br>MM / DD / YYYY<br>09 / 11 / 2007 |
| Mailing Address P.O. Box 31122   |  | Amount of Each Disbursement this Period<br>46.54   |
| City Tampa State FL Zip Code 33631-3122  | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53                            |  |
| Purpose of Disbursement<br>Phone<br>Candidate Name   | Category/Type<br>001   | PHONE  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 334.76 |
| <b>TOTAL</b> 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)

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|                                     |     |                          |     |                          |     |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17  | <input type="checkbox"/> | 18  | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/>            | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21  |

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NAME OF COMMITTEE (In Full)  
SOUDER FOR CONGRESS, INC.

|  |  |  |   |
|--|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Verizon</b>   |  | Transaction ID: 71010.E3832<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 19 / 2007 |   |
| Mailing Address P.O. Box 31122   |  | Amount of Each Disbursement this Period<br>248.39  |   |
| City Tampa<br>State FL<br>Zip Code 33631-3122  | Purpose of Disbursement<br>Phone<br>Candidate Name   | 001<br>Category/<br>Type   | <input type="checkbox"/> Refund or Disposal of Excess<br>Contributions Required Under<br>11 C.F.R. 400.53 |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | PHONE   |

|  |   |                 |
|--|---|-----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | ▶ | <b>248.39</b>   |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ | <b>29569.83</b> |