

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
Hoosiers Supporting Buyer For Congress

ADDRESS (number and street) 103 West Broadway St, P.O. Box 712
 Check if different than previously reported. (ACC)
Monticello IN 47960

2. **FEC IDENTIFICATION NUMBER** C00255471
CITY STATE ZIP CODE STATE DISTRICT
IN 04
3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 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 2009 through 09 30 2009

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 Douglas E. Raderstorf

Signature of Treasurer Electronically Filed by Douglas E. Raderstorf Date 12 01 2009

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

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Hoosiers Supporting Buyer For Congress

Report Covering the Period: From: To:

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	168351.40	267650.25
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	168351.40	267650.25
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	59195.32	299931.76
(b) Total Offsets to Operating Expenditures (from Line 14).....	373.51	4815.02
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	58821.81	295116.74
8. Cash on Hand at Close of Reporting Period (from Line 27).....	373493.72	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name
Hoosiers Supporting Buyer For Congress

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	9

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	43394.40	53351.54
(i) Itemized (use Schedule A).....	332.00	1423.71
(ii) Unitemized.....	43726.40	54775.25
(iii) TOTAL of contributions from individuals..... ▶	1500.00	2500.00
(b) Political Party Committees.....	123125.00	209625.00
(c) Other Political Committees (such as PACS).....	0.00	750.00
(d) The Candidate.....	168351.40	267650.25
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))		
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.).....	373.51	4815.02
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	371.09	2401.21
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	169096.00	274866.48

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	59195.32	299931.76
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS.....	2500.00	2600.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	61695.32	302531.76

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	266093.04
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	169096.00
25. SUBTOTAL (add Line 23 and Line 24).....	435189.04
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	61695.32
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	373493.72

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

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

FOR LINE NUMBER: PAGE 5 / 92

(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.

Full Name (Last, First, Middle Initial)
Abbott Laboratories PAC

Mailing Address 1710 Rhode Island Ave., NW
Suite 300

City State Zip Code
Washington DC 20036

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

Name of Employer Occupation

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 30 / 2009

Transaction ID: C18071

Amount of Each Receipt this Period

2000.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Altria

Mailing Address 101 Constitution Avenue, NW

City State Zip Code
Washington DC 20001

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

Name of Employer Occupation

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 30 / 2009

Transaction ID: C18059

Amount of Each Receipt this Period

2500.00

Receipt

C.

Full Name (Last, First, Middle Initial)
American Academy of

Mailing Address Ophthalmology PAC
1101 Vermont Ave., NW

City State Zip Code
Washington DC 20005

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

Name of Employer Occupation

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 30 / 2009

Transaction ID: C18079

Amount of Each Receipt this Period

1500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 92
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
American Academy of Neurology

Mailing Address Professional Assoc.
1080 Montreal Ave.

City State Zip Code
Saint Paul MN 55116

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	9

Transaction ID: C18078

Amount of Each Receipt this Period
1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
American Apparel & Footwear Assoc.

Mailing Address
1601 N. Kent St. Suite 1200

City State Zip Code
Rosslyn VA 22209

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	9

Transaction ID: C18099

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
American Assoc. of Orthopaedic Surgeons

Mailing Address 317 Massachusetts Ave. NE
Suite 100

City State Zip Code
Washington DC 20002

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	9

Transaction ID: C18076

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **3000.00**

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

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

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

FOR LINE NUMBER: PAGE 7 / 92
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
American Bankers Assoc. PAC
Mailing Address 1120 Connecticut Ave., NW
City Washington State DC Zip Code 20036
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2500.00
Date of Receipt 08 / 04 / 2009
Transaction ID: C17974
Amount of Each Receipt this Period 1500.00
Receipt

B. Full Name (Last, First, Middle Initial)
American College of Cardiology
Mailing Address 2400 North Street NW
City Washington State DC Zip Code 20037
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt 08 / 28 / 2009
Transaction ID: C18017
Amount of Each Receipt this Period 1000.00
Receipt

C. Full Name (Last, First, Middle Initial)
American College of Surgeons
Mailing Address 1640 Wisconsin Ave. NW
City Washington State DC Zip Code 20007
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2500.00
Date of Receipt 09 / 30 / 2009
Transaction ID: C18080
Amount of Each Receipt this Period 2500.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 5000.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 92
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
American Dental PAC

Mailing Address 1111 14th St., NW
Suite 1100

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 625.00

Date of Receipt 07 / 17 / 2009
Transaction ID: C17953
 Amount of Each Receipt this Period 625.00
 In-Kind
 Note: golf fees

B. Full Name (Last, First, Middle Initial)
American Dental PAC

Mailing Address 1111 14th St., NW
Suite 1100

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1625.00

Date of Receipt 07 / 27 / 2009
Transaction ID: C17956
 Amount of Each Receipt this Period 1000.00
 Receipt

C. Full Name (Last, First, Middle Initial)
American Dental PAC

Mailing Address 1111 14th St., NW
Suite 1100

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2625.00

Date of Receipt 07 / 27 / 2009
Transaction ID: C17957
 Amount of Each Receipt this Period 1000.00
 Receipt

SUBTOTAL of Receipts This Page (optional) ► 2625.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 92
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
American Dental PAC

Mailing Address 1111 14th St., NW
Suite 1100

City State Zip Code
Washington DC 20005

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3125.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 27 / 2009

Transaction ID: C17958

Amount of Each Receipt this Period
500.00

Receipt

B. Full Name (Last, First, Middle Initial)
American Dental PAC

Mailing Address 1111 14th St., NW
Suite 1100

City State Zip Code
Washington DC 20005

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5625.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 27 / 2009

Transaction ID: C17960

Amount of Each Receipt this Period
2500.00

Receipt

C. Full Name (Last, First, Middle Initial)
American Electric Power

Mailing Address Committee for Responsible Govn
801 Pennsylvania Ave. NW Suite 320

City State Zip Code
Washington DC 20004

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 04 / 2009

Transaction ID: C17991

Amount of Each Receipt this Period
2500.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **5500.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 92
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
American Health Care

Mailing Address Association PAC
1201 L Street NW

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 8 / 0 4 / 2 0 0 9

Transaction ID: C17981

Amount of Each Receipt this Period
1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
American Health Care

Mailing Address Association PAC
1201 L Street NW

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 9 / 1 4 / 2 0 0 9

Transaction ID: C18038

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
American Hospital Assoc. PAC

Mailing Address 325 Seventh Street, NW

City Washington State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 9 / 1 4 / 2 0 0 9

Transaction ID: C18036

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **3000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 92
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
American Society for Radiation Oncology

Mailing Address 8280 Willow Oaks Corporate Drive
Suite 500

City State Zip Code
Fairfax VA 22031

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	9

Transaction ID: C18075

Amount of Each Receipt this Period
1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
American Society of

Mailing Address Anesthesiologists - Suite 606
1101 Vermont Avenue, NW

City State Zip Code
Washington DC 20005

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	9

Transaction ID: C18077

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address 555 13th Street NW
Suite 600 West

City State Zip Code
Washington DC 20004

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	9

Transaction ID: C18073

Amount of Each Receipt this Period
2500.00

Receipt

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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 92
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Associated Builders & Contractors PAC

Mailing Address 4250 North Fairfax Drive
9th Floor

City State Zip Code
Arlington VA 22203

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	4	/	2	0	0	9

Transaction ID: C17987

Amount of Each Receipt this Period
2500.00

Receipt

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

Mailing Address 1401 I Street
Suite 1100

City State Zip Code
Washington DC 20005

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	7	/	2	0	0	9

Transaction ID: C17959

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Barnes & Thornburg PAC

Mailing Address 11 S. Meridian Street

City State Zip Code
Indianapolis IN 46204

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	4	/	2	0	0	9

Transaction ID: C18044

Amount of Each Receipt this Period
500.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **4000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 92
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Bayer Corporation PAC

Mailing Address 100 Bayer Road

City State Zip Code
Pittsburgh PA 15205

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period
1000.00

Receipt

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 8 / 2 8 / 2 0 0 9
Transaction ID: C18016

B. Full Name (Last, First, Middle Initial)
Boston Scientific Corp. PAC

Mailing Address One Boston Scientific Placse

City State Zip Code
Natick MA 01760

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period
2000.00

Receipt

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 9 / 3 0 / 2 0 0 9
Transaction ID: C18072

C. Full Name (Last, First, Middle Initial)
Bristol-Myers Squibb Co. Employee Pac

Mailing Address 345 Park Ave., 11th Fl.

City State Zip Code
New York NY 10154

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period
1000.00

Receipt

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 9 / 3 0 / 2 0 0 9
Transaction ID: C18068

SUBTOTAL of Receipts This Page (optional) ► **4000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 92
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Burlington Northern & Santa Railway PAC

Mailing Address 500 New Jersey Ave. NW
Suite 550

City State Zip Code
Washington DC 20001

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 8 / 1 4 / 2 0 0 9

Transaction ID: C17997

Amount of Each Receipt this Period
2000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Comcast Corp. PAC

Mailing Address 2001 Pennsylvania Ave. NW
Suite 500

City State Zip Code
Washington DC 20006

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 8 / 2 8 / 2 0 0 9

Transaction ID: C18012

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address Action Council of CUNA
601 Pennsylvania Ave., NW

City State Zip Code
Washington DC 20005-2207

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 8 / 0 4 / 2 0 0 9

Transaction ID: C17990

Amount of Each Receipt this Period
2500.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **5500.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 92
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
CSX Transportation Inc. PAC

Mailing Address 1331 Pennsylvania Ave., NW
Suite 560, National Place

City Washington State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 08 / 14 / 2009
Transaction ID: C17998
 Amount of Each Receipt this Period: 2000.00
 Receipt

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

Mailing Address 1400 16th Street NW
Suite 600

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 08 / 14 / 2009
Transaction ID: C18002
 Amount of Each Receipt this Period: 1000.00
 Receipt

C. Full Name (Last, First, Middle Initial)
Cummins Inc. PAC

Mailing Address 601 Pennsylvania Ave. NW
North Bldg Suite 625

City Washington State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 08 / 04 / 2009
Transaction ID: C17970
 Amount of Each Receipt this Period: 1000.00
 Receipt

SUBTOTAL of Receipts This Page (optional) ► 4000.00

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

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

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

FOR LINE NUMBER: PAGE 16 / 92
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Dickstein Shapiro PAC

Mailing Address 1825 Eye Street, NW

City State Zip Code
Washington DC 20006

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 9 / 3 0 / 2 0 0 9

Transaction ID: C18057

Amount of Each Receipt this Period
2500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Dow Chemical Co. AGPAC

Mailing Address 9330 Zionsville Rd.

City State Zip Code
Indianapolis IN 46268

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 9 / 1 4 / 2 0 0 9

Transaction ID: C18039

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Eli Lilly Company PAC

Mailing Address 555 12th St., NW Suite 650

City State Zip Code
Washington DC 20004

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 8 / 2 8 / 2 0 0 9

Transaction ID: C18013

Amount of Each Receipt this Period
2500.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **6000.00**

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

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

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

FOR LINE NUMBER: PAGE 17 / 92
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

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

Mailing Address 975 F Street, NW
Suite 550

City Washington State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 09 / 30 / 2009
Transaction ID: C18102
 Amount of Each Receipt this Period 1000.00
 Receipt

B. Full Name (Last, First, Middle Initial)
Indiana ACRE Indiana Statewide Assoc. of

Mailing Address Electric Coop. Inc..
720 N. High School Rd.

City Indianapolis State IN Zip Code 46214

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt 08 / 28 / 2009
Transaction ID: C18014
 Amount of Each Receipt this Period 3000.00
 Receipt

C. Full Name (Last, First, Middle Initial)
International Assoc. of Fire Fighters

Mailing Address 1750 New York Avenue Nw

City Washington State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 08 / 14 / 2009
Transaction ID: C18007
 Amount of Each Receipt this Period 1000.00
 Receipt

SUBTOTAL of Receipts This Page (optional) ► 5000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 92
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Johnson & Johnson Employees Good

Mailing Address Government Fund
One Johnson & Johnson Plaza.

City State Zip Code
New Brunswick NJ 08933-7204

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	9

Transaction ID: C18069

Amount of Each Receipt this Period
1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Lorillard Tobacco Company

Mailing Address 714 Green Valley Rd.

City State Zip Code
Greensboro NC 27408

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	9

Transaction ID: C18056

Amount of Each Receipt this Period
2500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Marathon Oil Employees PAC

Mailing Address 539 South Main Street
Room 2635

City State Zip Code
Findlay OH 45840

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	4	/	2	0	0	9

Transaction ID: C18003

Amount of Each Receipt this Period
1000.00

Receipt

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 92
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

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

Mailing Address 601 Pennsylvania Ave. NW
North Building Suite 1200

City Washington State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt 09 / 30 / 2009
Transaction ID: C18074
 Amount of Each Receipt this Period 2500.00
 Receipt

B. Full Name (Last, First, Middle Initial)
National Air Traffic Controllers

Mailing Address 1325 Massachusetts Ave. NW

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt 08 / 04 / 2009
Transaction ID: C17989
 Amount of Each Receipt this Period 2500.00
 Receipt

C. Full Name (Last, First, Middle Initial)
National Assoc. of Convenience Stores

Mailing Address 1600 Duke Street

City Alexandria State VA Zip Code 22314

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt 08 / 14 / 2009
Transaction ID: C18004
 Amount of Each Receipt this Period 1500.00
 Receipt

SUBTOTAL of Receipts This Page (optional) ► **6500.00**

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

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

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

FOR LINE NUMBER: PAGE 20 / 92
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
National Beer Wholesalers Assoc. PAC

Mailing Address 1100 King Street
Suite 600

City State Zip Code
Alexandria VA 22314

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	4	/	2	0	0	9

Transaction ID: C18008

Amount of Each Receipt this Period
2500.00

Receipt

B. Full Name (Last, First, Middle Initial)
National Roofing Contractors

Mailing Address Association PAC
324 Fourth Street, NE

City State Zip Code
Washington DC 20002

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	4	/	2	0	0	9

Transaction ID: C17973

Amount of Each Receipt this Period
1500.00

Receipt

C. Full Name (Last, First, Middle Initial)
NAUS-PAC

Mailing Address 5535 Hempstead Way

City State Zip Code
Springfield VA 22151

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	9

Transaction ID: C18101

Amount of Each Receipt this Period
500.00

Receipt

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 92
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Norfolk Southern Corp.

Mailing Address One Constitution Ave. NE
1500 K St. NW Suite 375

City Washington State DC Zip Code 20002

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt: 08 / 14 / 2009
Transaction ID: C17999
 Amount of Each Receipt this Period: 4000.00
 Receipt

B. Full Name (Last, First, Middle Initial)
Norfolk Southern Corp.

Mailing Address One Constitution Ave. NE
1500 K St. NW Suite 375

City Washington State DC Zip Code 20002

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 7500.00

Date of Receipt: 09 / 30 / 2009
Transaction ID: C18058
 Amount of Each Receipt this Period: 2500.00
 Receipt

C. Full Name (Last, First, Middle Initial)
NOVO Nordisk Changing Diabetes PAC

Mailing Address 500 New Jersey Ave. NW
Suite 350

City Washington State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 09 / 30 / 2009
Transaction ID: C18066
 Amount of Each Receipt this Period: 1000.00
 Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **7500.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 92
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
NRA-Political Victory Fund

Mailing Address 11250 Waples Mill Road

City State Zip Code
Fairfax VA 22030

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	8	/	2	0	0	9

Transaction ID: C18015

Amount of Each Receipt this Period
1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Nucor Corporation PAC

Mailing Address 4537 South Nucur Road

City State Zip Code
Crawfordsville IN 47933

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	4	/	2	0	0	9

Transaction ID: C17988

Amount of Each Receipt this Period
2500.00

Receipt

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

Mailing Address 235 East 42nd St.

City State Zip Code
New York NY 10017

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	9

Transaction ID: C18067

Amount of Each Receipt this Period
1000.00

Receipt

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 92
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
RJ Reynolds PAC

Mailing Address 401 N. Main St.
P.O. Box 718

City Winston Salem State NC Zip Code 27102

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt: 09 / 30 / 2009
Transaction ID: C18060
 Amount of Each Receipt this Period: 5000.00
 Receipt

B. Full Name (Last, First, Middle Initial)
Rolls-Royce North America PAC

Mailing Address 1875 Explorer Street
Suite 200

City Reston State VA Zip Code 20190-0420

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 08 / 04 / 2009
Transaction ID: C17983
 Amount of Each Receipt this Period: 1000.00
 Receipt

C. Full Name (Last, First, Middle Initial)
Society of Independent Gasoline

Mailing Address 3930 Pender Drive
Suite 340

City Fairfax State VA Zip Code 22030

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 08 / 04 / 2009
Transaction ID: C17993
 Amount of Each Receipt this Period: 2000.00
 Receipt

SUBTOTAL of Receipts This Page (optional) ► **8000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 92
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
T-Mobile PAC

Mailing Address 401 9th Street NW
Suite 550

City Washington State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt: 09 / 30 / 2009
Transaction ID: C18062
 Amount of Each Receipt this Period: 2000.00
 Receipt

B. Full Name (Last, First, Middle Initial)
T-Mobile PAC

Mailing Address 401 9th Street NW
Suite 550

City Washington State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt: 09 / 30 / 2009
Transaction ID: C18061
 Amount of Each Receipt this Period: 1000.00
 Receipt

C. Full Name (Last, First, Middle Initial)
T-Mobile PAC

Mailing Address 401 9th Street NW
Suite 550

City Washington State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt: 09 / 30 / 2009
Transaction ID: C18063
 Amount of Each Receipt this Period: 1000.00
 Receipt

SUBTOTAL of Receipts This Page (optional) ► 4000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 92
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Tate & Lyle PAC

Mailing Address 2200 E. Eldorado Street

City State Zip Code
Decatur IL 62521

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	4	/	2	0	0	9

Transaction ID: C17992

Amount of Each Receipt this Period
2500.00

Receipt

B. Full Name (Last, First, Middle Initial)
The GlaxoSmithKline PAC

Mailing Address Five Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	9

Transaction ID: C18070

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
The Prudential Financial PAC

Mailing Address 1140 Connecticut Ave. NW
Suite 510

City State Zip Code
Washington DC 20036

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	4	/	2	0	0	9

Transaction ID: C17995

Amount of Each Receipt this Period
1000.00

Receipt

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 92

(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.

Full Name (Last, First, Middle Initial)
Travelers PAC

Mailing Address One Tower Square

City State Zip Code
Hartford CT 06183

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 28 / 2009

Transaction ID: C18018

Amount of Each Receipt this Period

2000.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Union Pacific Corp. Fund for

Mailing Address Effective Government
600 Thirteenth Street, NW Suite 3

City State Zip Code
Washington DC 20005

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 14 / 2009

Transaction ID: C18000

Amount of Each Receipt this Period

5000.00

Receipt

C.

Full Name (Last, First, Middle Initial)
United Parcel Service PAC

Mailing Address 316 Pennsylvania Ave. SE

City State Zip Code
Washington DC 20003

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 30 / 2009

Transaction ID: C18094

Amount of Each Receipt this Period

2500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

9500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 92
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
United Parcel Service PAC

Mailing Address 316 Pennsylvania Ave. SE

City State Zip Code
Washington DC 20003

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	9

Transaction ID: C18095

Amount of Each Receipt this Period
2000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Universal Leaf Tobacco PAC

Mailing Address P.O. Box 25099

City State Zip Code
Richmond VA 23260

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	9

Transaction ID: C18053

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
USAA Group PAC

Mailing Address USAA Building D-3-W

City State Zip Code
San Antonio TX 78288

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	4	/	2	0	0	9

Transaction ID: C17996

Amount of Each Receipt this Period
5000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **8000.00**

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

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

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

FOR LINE NUMBER: PAGE 28 / 92
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Verizon Communications Inc. Good

Mailing Address Government Club PAC
1300 I Street, NW

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 27 / 2009

Transaction ID: C17962

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address One West Fourth Street

City Winston Salem State NC Zip Code 27101

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 30 / 2009

Transaction ID: C18093

Amount of Each Receipt this Period
1500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Wyeth Good Government Fund

Mailing Address Five Giralda Farms

City Madison State NJ Zip Code 07940

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 30 / 2009

Transaction ID: C18052

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **3500.00**

TOTAL This Period (last page this line number only) ▶ **123125.00**

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 92

(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Ralph Anderson

Mailing Address P.O. Box 966

City Bedford State IN Zip Code 47421

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

Name of Employer Crawderss Occupation Pharmacist

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 09 / 14 / 2009
Transaction ID: C18023
 Amount of Each Receipt this Period: 500.00
 Receipt

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

Mailing Address P.O. Box 966

City Bedford State IN Zip Code 47421

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

Name of Employer Crawderss Occupation Pharmacist

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 09 / 14 / 2009
Transaction ID: C18022
 Amount of Each Receipt this Period: 500.00
 Receipt

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

Mailing Address P.O. Box 966

City Bedford State IN Zip Code 47421

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

Name of Employer Crawderss Occupation Pharmacist

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt: 09 / 14 / 2009
Transaction ID: C18024
 Amount of Each Receipt this Period: 500.00
 Receipt

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 92
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Ralph Anderson
Mailing Address P.O. Box 966
City Bedford State IN Zip Code 47421
FEC ID number of contributing federal political committee. **C**
Name of Employer Crawderss Occupation Pharmacist
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00
Date of Receipt 09 / 14 / 2009
Transaction ID: C18025
Amount of Each Receipt this Period 500.00
Receipt

B. Full Name (Last, First, Middle Initial)
Chet Aubin
Mailing Address 5520 West 200 North
City Bargersville State IN Zip Code 46106
FEC ID number of contributing federal political committee. **C**
Name of Employer Johnson County REMC Occupation CEO
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 200.00
Date of Receipt 08 / 28 / 2009
Transaction ID: C18010
Amount of Each Receipt this Period 200.00
Receipt

C. Full Name (Last, First, Middle Initial)
William Barrett
Mailing Address 600 N. Emerson Ave.
City Greenwood State IN Zip Code 46142
FEC ID number of contributing federal political committee. **C**
Name of Employer self Occupation Attorney
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 250.00
Date of Receipt 08 / 28 / 2009
Transaction ID: C18011
Amount of Each Receipt this Period 250.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 950.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 92

(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. 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: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 0 4 / 2 0 0 9

Transaction ID: C17979

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Roy Coffee III

Mailing Address 3209 Thornapple Street

City State Zip Code
Chevy Chase MD 20815

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

Name of Employer Information Requested Occupation Information Requested
Locke Lord Strategies Partner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 3 0 / 2 0 0 9

Transaction ID: C18098

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address 1208 E. Wylie St.

City State Zip Code
Bloomington IN 47401

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

Name of Employer Information Requested Occupation Information Requested
Cook Group owner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 1 4 / 2 0 0 9

Transaction ID: C18035

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

2250.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 32 / 92
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Brennan Dawson

Mailing Address 304 Johns Bluff Road

City Lewisville State NC Zip Code 27023

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

Name of Employer Reynolds American Occupation Executive

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 09 / 30 / 2009
Transaction ID: C18051
 Amount of Each Receipt this Period 1000.00
 Receipt

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

Mailing Address 3100 Reeves Road

City Plainfield State IN Zip Code 46168

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

Name of Employer IDS Occupation Pres./CEO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 794.40

Date of Receipt 08 / 27 / 2009
Transaction ID: C18009
 Amount of Each Receipt this Period 794.40
 In-Kind
 food & bev. expense

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

Mailing Address 3100 Reeves Road

City Plainfield State IN Zip Code 46168

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

Name of Employer IDS Occupation Pres./CEO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1294.40

Date of Receipt 09 / 14 / 2009
Transaction ID: C18043
 Amount of Each Receipt this Period 500.00
 Receipt

SUBTOTAL of Receipts This Page (optional) ► 2294.40

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 92
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Del Demaree

Mailing Address 5511 Four Mile Dr.

City State Zip Code
Kokomo IN 46903-3831

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

Name of Employer Occupation
Syndicate Sales Executive

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 1 4 / 2 0 0 9

Transaction ID: C18005

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 5 Gwendolyn Court

City State Zip Code
Santa Fe NM 87506

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

Name of Employer Occupation
Santa Fe National Tobacco Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 3 0 / 2 0 0 9

Transaction ID: C18091

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address 177 W. Westfield Blvd.

City State Zip Code
Indianapolis IN 46208

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

Name of Employer Occupation
APPIAN Pres./CEO

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 0 4 / 2 0 0 9

Transaction ID: C17971

Amount of Each Receipt this Period
1050.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **1800.00**

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

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

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

FOR LINE NUMBER: PAGE 34 / 92
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

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

Mailing Address 135 Coventry Park Lane

City State Zip Code
Winston Salem NC 27104

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

Name of Employer Reynolds American Occupation Executive

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 3 0 / 2 0 0 9

Transaction ID: C18088

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address P.O. Box 1608
750 Daniels Way

City State Zip Code
Bloomington IN 47402

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

Name of Employer Cook Group Occupation Executive

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 1 4 / 2 0 0 9

Transaction ID: C18034

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address 306 A Street, SE

City State Zip Code
Washington DC 20003

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

Name of Employer Reynolds American Occupation Vice President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 3 0 / 2 0 0 9

Transaction ID: C18055

Amount of Each Receipt this Period
2000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **3500.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 92
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
McDara Folan III

Mailing Address 2020 Buena Vista Road

City State Zip Code
Winston Salem NC 27104

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

Name of Employer Reynolds American Occupation Executive

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2009

Transaction ID: C18087

Amount of Each Receipt this Period
500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Ann Marie Gilchrist

Mailing Address 125 Windham Farm Lane

City State Zip Code
Lewisville NC 27023

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2009

Transaction ID: C18082

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address 4084 Gran Haven Dr.

City State Zip Code
Bloomington IN 47401

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

Name of Employer Cook Group Occupation Pres.

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 14 / 2009

Transaction ID: C18033

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **2000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 92
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

<p>A. Full Name (Last, First, Middle Initial) Greg Henneke</p> <p>Mailing Address 700 N. Alabama Street #502</p> <p>City State Zip Code Indianapolis IN 46204</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer American Consulting, Inc. Occupation Vice President</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 900.00</p>	<p>Date of Receipt 08 / 04 / 2009</p> <p>Transaction ID: C17980</p> <p>Amount of Each Receipt this Period 900.00</p> <p>Receipt</p>
---	--

<p>B. Full Name (Last, First, Middle Initial) Greg Henneke</p> <p>Mailing Address 700 N. Alabama Street #502</p> <p>City State Zip Code Indianapolis IN 46204</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer American Consulting, Inc. Occupation Vice President</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 2400.00</p>	<p>Date of Receipt 08 / 04 / 2009</p> <p>Transaction ID: C17972</p> <p>Amount of Each Receipt this Period 1500.00</p> <p>Receipt</p>
--	---

<p>C. Full Name (Last, First, Middle Initial) Larry Herzberg</p> <p>Mailing Address 2710 Forst Drive</p> <p>City State Zip Code Winston Salem NC 27104</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Reynolds American Occupation Executive</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 500.00</p>	<p>Date of Receipt 09 / 30 / 2009</p> <p>Transaction ID: C18084</p> <p>Amount of Each Receipt this Period 500.00</p> <p>Receipt</p>
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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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 92

(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)
Hoosiers Supporting Buyer For Congress

A.

Full Name (Last, First, Middle Initial)
Mark Howell

Mailing Address 1982 Finchley Road

City State Zip Code
Carmel IN 46032

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

Name of Employer Occupation
Bright Point President

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 14 / 2009

Transaction ID: C18045

Amount of Each Receipt this Period

500.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Anthony Hughes

Mailing Address 3957 Chadwick Drive

City State Zip Code
Carmel IN 46033

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

Name of Employer Occupation
Fulfillment Group Information Requested

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 14 / 2009

Transaction ID: C18046

Amount of Each Receipt this Period

500.00

Receipt

C.

Full Name (Last, First, Middle Initial)
John Kamstra

Mailing Address 600 S. Woodcrest Dr.

City State Zip Code
Bloomington IN 47401

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

Name of Employer Occupation
Cook Group Information Requested

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 14 / 2009

Transaction ID: C18029

Amount of Each Receipt this Period

500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 92
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

<p>A. Full Name (Last, First, Middle Initial) Arnold Katz</p> <p>Mailing Address 1270 Round Hill Rd.</p> <p>City State Zip Code Bryn Mawr PA 19010</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Brokerage Concepts, Inc</p> <p>Occupation President</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 4600.00</p>	<p>Date of Receipt 08 / 04 / 2009</p> <p>Transaction ID: C17994</p> <p>Amount of Each Receipt this Period 4600.00</p> <p>Receipt</p>
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<p>B. Full Name (Last, First, Middle Initial) Lindsay Kimmel</p> <p>Mailing Address 1446 Old State Road 64 NE</p> <p>City State Zip Code New Salisbury IN 47161</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Information Requested</p> <p>Occupation housewife</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt 09 / 14 / 2009</p> <p>Transaction ID: C18031</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>Receipt</p>
--	---

<p>C. Full Name (Last, First, Middle Initial) Michael Ligon</p> <p>Mailing Address P.O. Box 29397</p> <p>City State Zip Code Richmond VA 23242</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Universal Leaf</p> <p>Occupation Executive</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 250.00</p>	<p>Date of Receipt 09 / 30 / 2009</p> <p>Transaction ID: C18050</p> <p>Amount of Each Receipt this Period 250.00</p> <p>Receipt</p>
---	--

SUBTOTAL of Receipts This Page (optional)	5850.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 92
	<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)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) Jeffrey MacKinnon		Date of Receipt MM / DD / YYYY 08 / 14 / 2009
	Mailing Address 3753 Oliver Street NW		Transaction ID: C18001
	City Washington	State DC	Zip Code 20015
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer self Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Legislative Representative Election Cycle-to-Date ▼ 1000.00	Receipt

B.	Full Name (Last, First, Middle Initial) Gary Mayfield		Date of Receipt MM / DD / YYYY 09 / 14 / 2009
	Mailing Address 9023 Balata Drive		Transaction ID: C18041
	City Ooltewah	State TN	Zip Code 37363
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
	Name of Employer KENCO Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation President Election Cycle-to-Date ▼ 250.00	Receipt

C.	Full Name (Last, First, Middle Initial) Randall Mays		Date of Receipt MM / DD / YYYY 08 / 04 / 2009
	Mailing Address 12525 N. LA Belle Court		Transaction ID: C17969
	City MeQuon	State WI	Zip Code 53092
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer Dynamic Grape Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Consultant Election Cycle-to-Date ▼ 750.00	Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1750.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 92

(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)
Hoosiers Supporting Buyer For Congress

A.

Full Name (Last, First, Middle Initial)

Darby McCarty

Mailing Address P.O. Box 261

City State Zip Code
Ellettsville IN 47429

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

Name of Employer Occupation
Smithville Telephone Co CEO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
800.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 14 / 2009

Transaction ID: C18030

Amount of Each Receipt this Period

800.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Helen Means

Mailing Address 937 Hudson Street

City State Zip Code
Indianapolis IN 46202

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

Name of Employer Occupation
Sataria Information Requested

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 14 / 2009

Transaction ID: C18048

Amount of Each Receipt this Period

500.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Richard Miller

Mailing Address 12275 N. Ogen Point Road
Unit 112

City State Zip Code
Syracuse IN 46567

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

Name of Employer Occupation
self owner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
700.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 04 / 2009

Transaction ID: C17985

Amount of Each Receipt this Period

700.00

Receipt

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 92
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

<p>A. Full Name (Last, First, Middle Initial) Richard Miller</p> <p>Mailing Address 12275 N. Ogen Point Road Unit 112</p> <p>City State Zip Code <u>Syracuse</u> IN 46567</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer self Occupation owner</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1450.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 9</p> <p>Transaction ID: C17984</p> <p>Amount of Each Receipt this Period 750.00</p> <p>Receipt</p>
--	--

<p>B. Full Name (Last, First, Middle Initial) Donnis Mizelle</p> <p>Mailing Address 1933 Bridgewater Dr.</p> <p>City State Zip Code <u>Avon</u> IN 46123</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Hendricks Power Co-op Occupation Executive</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 9</p> <p>Transaction ID: C17968</p> <p>Amount of Each Receipt this Period 250.00</p> <p>Receipt</p>
---	--

<p>C. Full Name (Last, First, Middle Initial) Morris Moore</p> <p>Mailing Address 3741 Kaismore Court</p> <p>City State Zip Code <u>Winston Salem</u> NC 27106</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Reynolds American Occupation Executive</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 9</p> <p>Transaction ID: C18086</p> <p>Amount of Each Receipt this Period 500.00</p> <p>Receipt</p>
---	--

SUBTOTAL of Receipts This Page (optional)	1500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 92

(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)
Hoosiers Supporting Buyer For Congress

A.

Full Name (Last, First, Middle Initial)
Jerome Neely

Mailing Address 3509 Saddlebrook Court

City State Zip Code
Bloomington IN 47401

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

Name of Employer Occupation
Rogers Group owner

Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 14 / 2009

Transaction ID: C18026

Amount of Each Receipt this Period

500.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Martha OConnor

Mailing Address 700 N. Alabama Street #502

City State Zip Code
Indianapolis IN 46204

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

Name of Employer Occupation
Information Requested Radiologist

Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1600.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 04 / 2009

Transaction ID: C17986

Amount of Each Receipt this Period

1600.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Rosemary Parker

Mailing Address 5903 Mt. Eagle Drive #708

City State Zip Code
Alexandria VA 22303

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 30 / 2009

Transaction ID: C18097

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

3100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 92
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

<p>A. Full Name (Last, First, Middle Initial) Tommy Payne II</p> <p>Mailing Address 121 Warwick Green Road</p> <p>City State Zip Code Winston Salem NC 27104</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Reynolds American Occupation Executive Vice President</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">Election Cycle-to-Date ▼ 2000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2009</p> <p>Transaction ID: C18054</p> <p>Amount of Each Receipt this Period 2000.00</p> <p>Receipt</p>
--	--

<p>B. Full Name (Last, First, Middle Initial) Mark Poovey</p> <p>Mailing Address P.O. Box 84</p> <p>City State Zip Code Winston Salem NC 27102</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Womble Carlyle Occupation Attorney</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">Election Cycle-to-Date ▼ 250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2009</p> <p>Transaction ID: C18081</p> <p>Amount of Each Receipt this Period 250.00</p> <p>Receipt</p>
--	---

<p>C. Full Name (Last, First, Middle Initial) David Powers</p> <p>Mailing Address 130 Copperfield Place Court</p> <p>City State Zip Code Winston Salem NC 27106</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Reynolds American Occupation Executive</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">Election Cycle-to-Date ▼ 500.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2009</p> <p>Transaction ID: C18089</p> <p>Amount of Each Receipt this Period 500.00</p> <p>Receipt</p>
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SUBTOTAL of Receipts This Page (optional)	2750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 44 / 92
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Jerry Romans, Jr.
Mailing Address 8555 Highway 601

City State Zip Code
Dobson NC 27017

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

Name of Employer Occupation
R.J. Reynolds Tobacco Executive

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2009

Transaction ID: C18085

Amount of Each Receipt this Period
500.00

Receipt

B. Full Name (Last, First, Middle Initial)
David Sabbagh
Mailing Address 3206 Coppertree Drive.

City State Zip Code
Bloomington IN 47401

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

Name of Employer Occupation
Information Requested retired

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 14 / 2009

Transaction ID: C18028

Amount of Each Receipt this Period
500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Robert Santa
Mailing Address 4650 S. Amber Drive

City State Zip Code
Bloomington IN 47401

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

Name of Employer Occupation
Cook Group Vice-President

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 14 / 2009

Transaction ID: C18027

Amount of Each Receipt this Period
500.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **1500.00**

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

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

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

FOR LINE NUMBER: PAGE 45 / 92
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Thomas Schilli
Mailing Address P.O. Box 351
City Remington State IN Zip Code 47977
FEC ID number of contributing federal political committee. **C**
Name of Employer Schilli Transportation Occupation President
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt 08 / 04 / 2009
Transaction ID: C17982
Amount of Each Receipt this Period 1000.00
Receipt

B. Full Name (Last, First, Middle Initial)
Megan Schmidt
Mailing Address 1556 Breezeridge Drive
City Saint Louis State MO Zip Code 63131
FEC ID number of contributing federal political committee. **C**
Name of Employer Information Requested Occupation housewife
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt 09 / 14 / 2009
Transaction ID: C18032
Amount of Each Receipt this Period 1000.00
Receipt

C. Full Name (Last, First, Middle Initial)
Mark Sell
Mailing Address 1611 West 146th Street
City Westfield State IN Zip Code 46074
FEC ID number of contributing federal political committee. **C**
Name of Employer MD Logistics Occupation Information Requested
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt 09 / 30 / 2009
Transaction ID: C18064
Amount of Each Receipt this Period 500.00
Receipt

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 92
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Herbert Shear

Mailing Address 215 North Woodland Road

City State Zip Code
Pittsburgh PA 15232

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

Name of Employer Occupation
GENCO Information Requested

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 14 / 2009

Transaction ID: C18049

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address 6454 Bonneville Drive

City State Zip Code
Indianapolis IN 46237

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

Name of Employer Occupation
Merchandise Warehouse CEO

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 14 / 2009

Transaction ID: C18047

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address 5915 Woodley Road

City State Zip Code
Mc Lean VA 22101

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

Name of Employer Occupation
King & Spalding Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2009

Transaction ID: C18092

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **2000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 92
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Stephen Strawsburg

Mailing Address

City State Zip Code

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

Name of Employer
Reynolds American Occupation
Executive

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 9

Transaction ID: C18090

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address 8215 Ceder Street

City State Zip Code
Silver Spring MD 20910

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

Name of Employer
Duke, Inc. Occupation
Information Requested

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 9

Transaction ID: C18065

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 9 Aloysius Circle

City State Zip Code
Cold Spring KY 41076

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

Name of Employer
The Verst Group Occupation
owner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y
0 9 / 1 4 / 2 0 0 9

Transaction ID: C18042

Amount of Each Receipt this Period
500.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 92
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.

Full Name (Last, First, Middle Initial)
Ernest Whitehurst

Mailing Address 1500 Brockton Lane

City State Zip Code
Winston Salem NC 27106

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

Name of Employer Reynolds American Occupation Executive

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2009

Transaction ID: C18083

Amount of Each Receipt this Period
500.00

Receipt

500.00

SUBTOTAL of Receipts This Page (optional)	▶	500.00
TOTAL This Period (last page this line number only)	▶	43394.40

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 92
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Hendricks County Republican Party
Mailing Address 4730 Devonshire Drive

City State Zip Code
Pittsboro IN 46167

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 9 / 1 4 / 2 0 0 9

Transaction ID: C18040

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Morgan County GOP
Mailing Address 9 West Main Street

City State Zip Code
Mooreville IN 46158

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 8 / 1 4 / 2 0 0 9

Transaction ID: C18006

Amount of Each Receipt this Period
250.00

Receipt

C. Full Name (Last, First, Middle Initial)
Tallon for Congress Committee
Mailing Address 1043 Drive Hardy Circle

City State Zip Code
Dillon SC 29536

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 9 / 3 0 / 2 0 0 9

Transaction ID: C18096

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **1500.00**

TOTAL This Period (last page this line number only) ► **1500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 50 / 92	
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input checked="" type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) Stephen Buyer		Date of Receipt
	Mailing Address 200 North Main St.		<input type="text" value="09"/> / <input type="text" value="14"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Monticello	IN	47960-
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer United States Government		Occupation 4th District Congressman	Transaction ID: C18037
Receipt For: 2010		Election Cycle-to-Date ▼	Amount of Each Receipt this Period
<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General		<input type="text" value="363.80"/>
<input type="checkbox"/> Other (specify) ▼		<input type="text" value="363.80"/>	Offsets to Operating Expenditure
			Note: reimbursement

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="363.80"/>
TOTAL This Period (last page this line number only)	<input type="text" value="363.80"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 51 / 92
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Wells Fargo

Mailing Address 119 North Main Street

City Monticello State IN Zip Code 47960-6748

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1711.88

Date of Receipt: 07 / 31 / 2009
Transaction ID: C17967
 Amount of Each Receipt this Period: 5.05
 Other Receipt
 note: July interest

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

Mailing Address 119 North Main Street

City Monticello State IN Zip Code 47960-6748

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1718.13

Date of Receipt: 08 / 31 / 2009
Transaction ID: C18020
 Amount of Each Receipt this Period: 6.25
 Other Receipt
 Note: September interest

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

Mailing Address 119 North Main Street

City Monticello State IN Zip Code 47960-6748

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1724.90

Date of Receipt: 09 / 30 / 2009
Transaction ID: C18104
 Amount of Each Receipt this Period: 6.77
 Other Receipt
 Note: October interest

SUBTOTAL of Receipts This Page (optional) ► **18.07**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 52 / 92	
	(check only one)			
<input 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 checked="" type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) Wells Fargo		Date of Receipt
	Mailing Address 119 North Main Street		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Monticello	IN	47960-6748
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	Transaction ID: C18105
Receipt For: 2010		Election Cycle-to-Date ▼	Amount of Each Receipt this Period
<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="text" value="2074.49"/>	<input type="text" value="349.59"/>
<input type="checkbox"/> Other (specify) ▼			Other Receipt
			Note: interest from cd

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="349.59"/>
TOTAL This Period (last page this line number only)	<input type="text" value="367.66"/>

**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 53 / 92

<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)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) American Dental PAC <hr/> Mailing Address 1111 14th St., NW Suite 1100 <hr/> City Washington State DC Zip Code 20005- <hr/> Purpose of Disbursement Note: golf fees Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: C17953IK Date of Disbursement 07 / 17 / 2009 <hr/> Amount of Each Disbursement this Period 625.00 <hr/> IN KIND: NOTE: GOLF FEES
B.	Full Name (Last, First, Middle Initial) Aristotle International, Inc. <hr/> Mailing Address 205 Pennsylvania Avenue, S.E. <hr/> City Washington State DC Zip Code 20003-1164 <hr/> Purpose of Disbursement technical support Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8713 Date of Disbursement 08 / 07 / 2009 <hr/> Amount of Each Disbursement this Period 862.50 <hr/> TECHNICAL SUPPORT
C.	Full Name (Last, First, Middle Initial) AT&T Wireless <hr/> Mailing Address P.O. Box 8220 <hr/> City Fox Valley State IL Zip Code 60572- <hr/> Purpose of Disbursement cell phone expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8690 Date of Disbursement 07 / 09 / 2009 <hr/> Amount of Each Disbursement this Period 123.17 <hr/> CELL PHONE EXPENSE

SUBTOTAL of Disbursements This Page (optional) ▶

1610.67

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)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) AT&T Wireless	Transaction ID: E8701
	Mailing Address P.O. Box 8220	Date of Disbursement 07 / 31 / 2009
	City Fox Valley State IL Zip Code 60572-	Amount of Each Disbursement this Period 124.94
	Purpose of Disbursement cell phone expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	CELL PHONE EXPENSE
B.	Full Name (Last, First, Middle Initial) AT&T Wireless	Transaction ID: E8796
	Mailing Address P.O. Box 8220	Date of Disbursement 09 / 09 / 2009
	City Fox Valley State IL Zip Code 60572-	Amount of Each Disbursement this Period 121.50
	Purpose of Disbursement cell phone expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	CELL PHONE EXPENSE
C.	Full Name (Last, First, Middle Initial) Best Western	Transaction ID: E8723
	Mailing Address 728 South Sixth St.	Date of Disbursement 08 / 14 / 2009
	City Monticello State IN Zip Code 47960-	Amount of Each Disbursement this Period 518.25
	Purpose of Disbursement in-kind to White Co. GOP Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	IN-KIND TO WHITE CO. GOP

SUBTOTAL of Disbursements This Page (optional) ▶

764.69

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)
Hoosiers Supporting Buyer For Congress

<p>A. Full Name (Last, First, Middle Initial) Stephen Buyer</p> <p>Mailing Address 200 North Main St.</p> <p>City Monticello State IN Zip Code 47960-</p> <p>Purpose of Disbursement colts tickets/fundraiser</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: E8811</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="880.00"/></p> <p>COLTS TICKETS/FUNDRAISER</p>
<p>B. Full Name (Last, First, Middle Initial) Campbell Printing Company</p> <p>Mailing Address 125 North Van Rensselaer St.</p> <p>City Rensselaer State IN Zip Code 47978-</p> <p>Purpose of Disbursement printing expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: E8711</p> <p>Date of Disbursement</p> <p><input type="text" value="08"/> <input type="text" value="07"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="216.58"/></p> <p>PRINTING EXPENSE</p>
<p>C. Full Name (Last, First, Middle Initial) Capitol Hill Club</p> <p>Mailing Address 300 1st. St., S.E.</p> <p>City Washington State DC Zip Code 20003-</p> <p>Purpose of Disbursement food & bev. expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: E8712</p> <p>Date of Disbursement</p> <p><input type="text" value="08"/> <input type="text" value="07"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1370.37"/></p> <p>FOOD & BEV. EXPENSE</p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2466.95"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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)
Hoosiers Supporting Buyer For Congress

<p>A. Full Name (Last, First, Middle Initial) Capitol Hill Club</p> <p>Mailing Address 300 1st. St., S.E.</p> <p>City Washington State DC Zip Code 20003-</p> <p>Purpose of Disbursement food & bev. expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: E8782</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="453.68"/></p> <p>FOOD & BEV. EXPENSE</p>
<p>B. Full Name (Last, First, Middle Initial) Comcast</p> <p>Mailing Address</p> <p>City Monticello State IN Zip Code 47960-</p> <p>Purpose of Disbursement cable service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: E8699</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="157.24"/></p> <p>CABLE SERVICE</p>
<p>C. Full Name (Last, First, Middle Initial) Comcast</p> <p>Mailing Address</p> <p>City Monticello State IN Zip Code 47960-</p> <p>Purpose of Disbursement cable service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: E8698</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="73.77"/></p> <p>CABLE SERVICE</p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="684.69"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial) Comcast Mailing Address City Monticello State IN Zip Code 47960- Purpose of Disbursement cable service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8705 Date of Disbursement 08 / 24 / 2009
	Amount of Each Disbursement this Period 85.62
	Category/Type CABLE SERVICE
	SEE BELOW
B. Full Name (Last, First, Middle Initial) Comcast Mailing Address City Monticello State IN Zip Code 47960- Purpose of Disbursement cable service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8808 Date of Disbursement 09 / 21 / 2009
	Amount of Each Disbursement this Period 78.62
	Category/Type CABLE SERVICE
	SEE BELOW
C. Full Name (Last, First, Middle Initial) Congressional Federal Credit Union Visa Mailing Address P.O. Box 3322 City Oakton State VA Zip Code 22124- Purpose of Disbursement see below Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8798 Date of Disbursement 09 / 01 / 2009
	Amount of Each Disbursement this Period 673.89
	Category/Type SEE BELOW
	SEE BELOW

SUBTOTAL of Disbursements This Page (optional) ▶	838.13
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) Rural King	Transaction ID: E8799 Date of Disbursement 09 / 30 / 2009
	Mailing Address 1004 North Main Street	Amount of Each Disbursement this Period 673.89
	City Monticello State IN Zip Code 47960-	
	Purpose of Disbursement fundraiser supplies	[MEMO ITEM] MEMO: FUNDRAISER SUPPLIES
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Corporate Card	Transaction ID: E8692 Date of Disbursement 07 / 09 / 2009
	Mailing Address P.O. Box 10347	Amount of Each Disbursement this Period 1815.49
	City Des Moines State IA Zip Code 50306-	
	Purpose of Disbursement see below	SEE BELOW
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Epiphany Productions	Transaction ID: E8697 Date of Disbursement 07 / 09 / 2009
	Mailing Address 2016 Mt. Vernon Ave.	Amount of Each Disbursement this Period 669.81
	City Alexandria State VA Zip Code 22301-	
	Purpose of Disbursement food & bev. expense	[MEMO ITEM] MEMO: FOOD & BEV. EXPENSE
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	1815.49
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)
Hoosiers Supporting Buyer For Congress

<p>A. Full Name (Last, First, Middle Initial) Godaddy.com</p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>Purpose of Disbursement website</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: E8696 Date of Disbursement 07 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 19.99</p> <p>[MEMO ITEM] MEMO: WEBSITE</p>
<p>B. Full Name (Last, First, Middle Initial) Mortons of Chicago</p> <p>Mailing Address 3251 Prospect Street, NW</p> <p>City State Zip Code Washington DC 20007-</p> <p>Purpose of Disbursement food & bev. expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: E8694 Date of Disbursement 07 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 200.00</p> <p>[MEMO ITEM] MEMO: FOOD & BEV. EXPENSE</p>
<p>C. Full Name (Last, First, Middle Initial) Ruths Chris Steak</p> <p>Mailing Address</p> <p>City State Zip Code Washington DC 20001-</p> <p>Purpose of Disbursement food & bev. expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: E8693 Date of Disbursement 07 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 856.66</p> <p>[MEMO ITEM] MEMO: FOOD & BEV. EXPENSE</p>

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<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)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Corporate Card

Mailing Address P.O. Box 10347

City Des Moines State IA Zip Code 50306-

Purpose of Disbursement see below

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: E8659
Date of Disbursement: 07 / 09 / 2009

Amount of Each Disbursement this Period: 4382.57

Category/Type

SEE BELOW

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

Mailing Address 5851 St. Rd. 43 N.

City West Lafayette State IN Zip Code 47906-

Purpose of Disbursement gasoline

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: E8664
Date of Disbursement: 07 / 09 / 2009

Amount of Each Disbursement this Period: 107.06

Category/Type

[MEMO ITEM]
MEMO: GASOLINE

C. Full Name (Last, First, Middle Initial)
Bill Estes Chevrolet, Inc.

Mailing Address 4105 West 96th Street

City Indianapolis State IN Zip Code 46268-

Purpose of Disbursement auto repair

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: E8675
Date of Disbursement: 07 / 09 / 2009

Amount of Each Disbursement this Period: 624.47

Category/Type

[MEMO ITEM]
MEMO: AUTO REPAIR

SUBTOTAL of Disbursements This Page (optional)

4382.57

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

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

NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.

Full Name (Last, First, Middle Initial)
Conrad Hotel

Mailing Address 50 West Washington Street

City Indianapolis State IN Zip Code 46204-

Purpose of Disbursement
hotel expense
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: E8665
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	9		2	0	0	9

Amount of Each Disbursement this Period

149.28

[MEMO ITEM]
MEMO: HOTEL EXPENSE

B.

Full Name (Last, First, Middle Initial)
Family Express

Mailing Address

City Lafayette State IN Zip Code 47902-

Purpose of Disbursement
gasoline
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: E8666
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	9		2	0	0	9

Amount of Each Disbursement this Period

90.77

[MEMO ITEM]
MEMO: GASOLINE

C.

Full Name (Last, First, Middle Initial)
Godaddy.com

Mailing Address

City State Zip Code

Purpose of Disbursement
website
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: E8676
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	9		2	0	0	9

Amount of Each Disbursement this Period

115.30

[MEMO ITEM]
MEMO: WEBSITE

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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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)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) House Gift Shop Mailing Address Longworth Bldg City Washington State DC Zip Code 20515- Purpose of Disbursement fundraiser gifts Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8661 Date of Disbursement 07 / 09 / 2009 Amount of Each Disbursement this Period 296.87 [MEMO ITEM] MEMO: FUNDRAISER GIFTS
B.	Full Name (Last, First, Middle Initial) Marathon Oil Mailing Address 1541 W. Thompson Rd. City Indianapolis State IN Zip Code 46241- Purpose of Disbursement gasoline Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8674 Date of Disbursement 07 / 09 / 2009 Amount of Each Disbursement this Period 82.72 [MEMO ITEM] MEMO: GASOLINE
C.	Full Name (Last, First, Middle Initial) Marsh Mailing Address 1440 E. 86th St. City Indianapolis State IN Zip Code 46241- Purpose of Disbursement food & bev. expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8668 Date of Disbursement 07 / 09 / 2009 Amount of Each Disbursement this Period 95.77 [MEMO ITEM] MEMO: FOOD & BEV. EXPENSE

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: (check only one)

<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)
Hoosiers Supporting Buyer For Congress

<p>A. Full Name (Last, First, Middle Initial) Mortons of Chicago</p> <p>Mailing Address 3251 Prospect Street, NW</p> <p>City Washington State DC Zip Code 20007-</p> <p>Purpose of Disbursement food & bev. expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: E8677</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2378.47"/></p> <p>[MEMO ITEM] MEMO: FOOD & BEV. EXPENSE</p>
<p>B. Full Name (Last, First, Middle Initial) Paradies</p> <p>Mailing Address</p> <p>City Washington State DC Zip Code 20005-</p> <p>Purpose of Disbursement food & bev. expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: E8663</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="17.36"/></p> <p>[MEMO ITEM] MEMO: FOOD & BEV. EXPENSE</p>
<p>C. Full Name (Last, First, Middle Initial) Shell Station</p> <p>Mailing Address</p> <p>City Lafayette State IN Zip Code 47903-</p> <p>Purpose of Disbursement gasoline</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: E8672</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="27.22"/></p> <p>[MEMO ITEM] MEMO: GASOLINE</p>

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)

<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)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) Target	Transaction ID: E8660 Date of Disbursement
	Mailing Address	<input type="text" value="07"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City: Lafayette State: IN Zip Code: 47905-	Amount of Each Disbursement this Period
	Purpose of Disbursement: office supplies	<input type="text" value="87.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM] MEMO: OFFICE SUPPLIES
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Wal-Mart	Transaction ID: E8667 Date of Disbursement
	Mailing Address: St. Rd. 24	<input type="text" value="07"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City: Monticello State: IN Zip Code: 47960-	Amount of Each Disbursement this Period
	Purpose of Disbursement: office supplies	<input type="text" value="116.44"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM] MEMO: OFFICE SUPPLIES
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Corporate Card	Transaction ID: E8706 Date of Disbursement
	Mailing Address: P.O. Box 10347	<input type="text" value="08"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City: Des Moines State: IA Zip Code: 50306-	Amount of Each Disbursement this Period
	Purpose of Disbursement: see below	<input type="text" value="87.22"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	SEE BELOW
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="87.22"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) Godaddy.com Mailing Address City State Zip Code Purpose of Disbursement website Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8707 Date of Disbursement 08 / 04 / 2009 Amount of Each Disbursement this Period 19.99 [MEMO ITEM] MEMO: WEBSITE	
B.	Full Name (Last, First, Middle Initial) Corporate Card Mailing Address P.O. Box 10347 City State Zip Code Des Moines IA 50306- Purpose of Disbursement see below Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8729 Date of Disbursement 08 / 04 / 2009 Amount of Each Disbursement this Period 1419.24 SEE BELOW	
C.	Full Name (Last, First, Middle Initial) BP Oil Mailing Address City State Zip Code Indianapolis IN 46241- Purpose of Disbursement gasoline Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8737 Date of Disbursement 08 / 04 / 2009 Amount of Each Disbursement this Period 54.59 [MEMO ITEM] MEMO: GASOLINE	

SUBTOTAL of Disbursements This Page (optional) ▶	1419.24
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)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) Capital Grille	Transaction ID: E8744 Date of Disbursement 08 / 04 / 2009
	Mailing Address 601 Pennsylvania Ave., NW	Amount of Each Disbursement this Period 235.80
	City Washington State DC Zip Code 20004-	
	Purpose of Disbursement food & bev. expense	[MEMO ITEM] MEMO: FOOD & BEV. EXPENSE
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Family Express	Transaction ID: E8742 Date of Disbursement 08 / 04 / 2009
	Mailing Address	Amount of Each Disbursement this Period 92.54
	City Lafayette State IN Zip Code 47902-	
	Purpose of Disbursement gasoline	[MEMO ITEM] MEMO: GASOLINE
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Fedex Ship	Transaction ID: E8733 Date of Disbursement 08 / 04 / 2009
	Mailing Address P.O. Box 1140 Dept. A	Amount of Each Disbursement this Period 21.23
	City Memphis State TN Zip Code 38101-	
	Purpose of Disbursement shipping	[MEMO ITEM] MEMO: SHIPPING
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

<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)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) House Gift Shop Mailing Address Longworth Bldg City Washington State DC Zip Code 20515- Purpose of Disbursement fundraiser gifts Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8745 Date of Disbursement 08 / 04 / 2009 Amount of Each Disbursement this Period 60.00 [MEMO ITEM] MEMO: FUNDRAISER GIFTS	
B.	Full Name (Last, First, Middle Initial) Markeys Audio Visual Mailing Address City Indianapolis State IN Zip Code 46224- Purpose of Disbursement office equipment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8747 Date of Disbursement 08 / 04 / 2009 Amount of Each Disbursement this Period 363.80 [MEMO ITEM] MEMO: OFFICE EQUIPMENT	
C.	Full Name (Last, First, Middle Initial) Paradies Mailing Address City Washington State DC Zip Code 20005- Purpose of Disbursement food & bev. expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8741 Date of Disbursement 08 / 04 / 2009 Amount of Each Disbursement this Period 10.78 [MEMO ITEM] MEMO: FOOD & BEV. EXPENSE	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) Shell Station Mailing Address City: Lafayette State: IN Zip Code: 47903- Purpose of Disbursement: gasoline Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8740 Date of Disbursement 08 / 04 / 2009	Amount of Each Disbursement this Period 32.26 [MEMO ITEM] MEMO: GASOLINE
B.	Full Name (Last, First, Middle Initial) U.S. House Members Dinner Mailing Address: B-217 Longworth Bldg. City: Washington State: DC Zip Code: 20002- Purpose of Disbursement: food & bev. expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8735 Date of Disbursement 08 / 04 / 2009	Amount of Each Disbursement this Period 16.90 [MEMO ITEM] MEMO: FOOD & BEV. EXPENSE
C.	Full Name (Last, First, Middle Initial) Wal-Mart Mailing Address: St. Rd. 24 City: Monticello State: IN Zip Code: 47960- Purpose of Disbursement: office supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8731 Date of Disbursement 08 / 04 / 2009	Amount of Each Disbursement this Period 93.89 [MEMO ITEM] MEMO: OFFICE SUPPLIES

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) Corporate Card Mailing Address P.O. Box 10347 City Des Moines State IA Zip Code 50306- Purpose of Disbursement see below Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8748 Date of Disbursement 08 / 24 / 2009 Amount of Each Disbursement this Period 4985.30 SEE BELOW	
B.	Full Name (Last, First, Middle Initial) Cafe Phillips Mailing Address 50F Street NW City Washington State DC Zip Code 20001- Purpose of Disbursement food & bev. expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8752 Date of Disbursement 08 / 24 / 2009 Amount of Each Disbursement this Period 283.75 [MEMO ITEM] MEMO: FOOD & BEV. EXPENSE	
C.	Full Name (Last, First, Middle Initial) Cibus Mailing Address Indianapolis Motor Speed City Indianapolis State IN Zip Code 46222- Purpose of Disbursement food & bev. expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8751 Date of Disbursement 08 / 24 / 2009 Amount of Each Disbursement this Period 4004.16 [MEMO ITEM] MEMO: FOOD & BEV. EXPENSE	

SUBTOTAL of Disbursements This Page (optional) ▶

4985.30

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)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) Godaddy.com Mailing Address City State Zip Code Purpose of Disbursement website Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8750 Date of Disbursement 08 / 24 / 2009 Amount of Each Disbursement this Period 19.99 [MEMO ITEM] MEMO: WEBSITE	
B.	Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address P.O. Box 630024 City State Zip Code Lafayette IN 47901- Purpose of Disbursement cell phone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8754 Date of Disbursement 08 / 24 / 2009 Amount of Each Disbursement this Period 381.75 [MEMO ITEM] MEMO: CELL PHONE	
C.	Full Name (Last, First, Middle Initial) Corporate Card Mailing Address P.O. Box 10347 City State Zip Code Des Moines IA 50306- Purpose of Disbursement see below Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8755 Date of Disbursement 08 / 24 / 2009 Amount of Each Disbursement this Period 4370.71 SEE BELOW	

SUBTOTAL of Disbursements This Page (optional) ▶

4370.71

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)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) American Airlines <hr/> Mailing Address <hr/> City State Zip Code <hr/> Purpose of Disbursement airfare Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8765 Date of Disbursement 08 / 24 / 2009 <hr/> Amount of Each Disbursement this Period 416.20 <hr/> [MEMO ITEM] MEMO: AIRFARE
B.	Full Name (Last, First, Middle Initial) Bobby Van Steakhouse <hr/> Mailing Address 809 15th Street NW <hr/> City State Zip Code Washington DC 20005- <hr/> Purpose of Disbursement food & bev. expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8756 Date of Disbursement 08 / 24 / 2009 <hr/> Amount of Each Disbursement this Period 1812.85 <hr/> [MEMO ITEM] MEMO: FOOD & BEV. EXPENSE
C.	Full Name (Last, First, Middle Initial) Chart House <hr/> Mailing Address 1 Cameron Street <hr/> City State Zip Code Alexandria VA 22314- <hr/> Purpose of Disbursement food & bev. expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8776 Date of Disbursement 08 / 24 / 2009 <hr/> Amount of Each Disbursement this Period 69.93 <hr/> [MEMO ITEM] MEMO: FOOD & BEV. EXPENSE

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

Use separate schedule(s)
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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)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) Conrad Hotel	Transaction ID: E8775 Date of Disbursement 08 / 24 / 2009
	Mailing Address 50 West Washington Street	Amount of Each Disbursement this Period 359.12
	City Indianapolis State IN Zip Code 46204-	
	Purpose of Disbursement hotel expense	[MEMO ITEM] MEMO: HOTEL EXPENSE
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Family Express	Transaction ID: E8772 Date of Disbursement 08 / 24 / 2009
	Mailing Address	Amount of Each Disbursement this Period 36.57
	City Lafayette State IN Zip Code 47902-	
	Purpose of Disbursement gasoline	[MEMO ITEM] MEMO: GASOLINE
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Fedex Ship	Transaction ID: E8778 Date of Disbursement 08 / 24 / 2009
	Mailing Address P.O. Box 1140 Dept. A	Amount of Each Disbursement this Period 27.01
	City Memphis State TN Zip Code 38101-	
	Purpose of Disbursement shipping	[MEMO ITEM] MEMO: SHIPPING
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

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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)
Hoosiers Supporting Buyer For Congress

A.

Full Name (Last, First, Middle Initial)
House Gift Shop

Mailing Address Longworth Bldg

City Washington State DC Zip Code 20515-

Purpose of Disbursement fundraiser gifts
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: E8777
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	4		2	0	9	

Amount of Each Disbursement this Period

537.02

[MEMO ITEM]
MEMO: FUNDRAISER GIFTS

B.

Full Name (Last, First, Middle Initial)
Hunan Dynasty Restaurant

Mailing Address 215 Pennsylvania Ave.

City Washington State DC Zip Code 20003-

Purpose of Disbursement food & bev. expense
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: E8759
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	4		2	0	9	

Amount of Each Disbursement this Period

82.10

[MEMO ITEM]
MEMO: FOOD & BEV. EXPENSE

C.

Full Name (Last, First, Middle Initial)
Johnnys Half Shell

Mailing Address 400 North Capitol Street NW

City Washington State DC Zip Code 20001-

Purpose of Disbursement food & bev. expense
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: E8764
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	4		2	0	9	

Amount of Each Disbursement this Period

373.56

[MEMO ITEM]
MEMO: FOOD & BEV. EXPENSE

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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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)
Hoosiers Supporting Buyer For Congress

<p>A. Full Name (Last, First, Middle Initial) Mail Inc.</p> <p>Mailing Address P.O. Box 5685</p> <p>City Lafayette State IN Zip Code 47903-</p> <p>Purpose of Disbursement postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: E8761</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center; border: 1px solid black; padding: 5px;">293.57</p> <p>[MEMO ITEM] MEMO: POSTAGE</p>
<p>B. Full Name (Last, First, Middle Initial) Matchbox Capitol</p> <p>Mailing Address</p> <p>City Washington State DC Zip Code 20005-</p> <p>Purpose of Disbursement food & bev. expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: E8758</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center; border: 1px solid black; padding: 5px;">374.80</p> <p>[MEMO ITEM] MEMO: FOOD & BEV. EXPENSE</p>
<p>C. Full Name (Last, First, Middle Initial) Shell Station</p> <p>Mailing Address</p> <p>City Lafayette State IN Zip Code 47903-</p> <p>Purpose of Disbursement gasoline</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: E8760</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center; border: 1px solid black; padding: 5px;">57.06</p> <p>[MEMO ITEM] MEMO: GASOLINE</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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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)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) Wal-Mart Mailing Address St. Rd. 24 City Monticello State IN Zip Code 47960- Purpose of Disbursement office supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8773 Date of Disbursement 08 / 24 / 2009 Amount of Each Disbursement this Period 1183.43 [MEMO ITEM] MEMO: OFFICE SUPPLIES
B.	Full Name (Last, First, Middle Initial) Washington Golf Center Mailing Address 2625 Shirlington Rd. City Arlington State VA Zip Code 22206- Purpose of Disbursement food & bev. expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8762 Date of Disbursement 08 / 24 / 2009 Amount of Each Disbursement this Period 1115.23 [MEMO ITEM] MEMO: FOOD & BEV. EXPENSE
C.	Full Name (Last, First, Middle Initial) Kelly Craven Mailing Address 1800 Old Meadow Rd. Unit #319 City Mc Lean State VA Zip Code 22102- Purpose of Disbursement fundraiser consultant Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8728 Date of Disbursement 08 / 24 / 2009 Amount of Each Disbursement this Period 2500.00 FUNDRAISER CONSULTANT

SUBTOTAL of Disbursements This Page (optional) ▶

2500.00

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

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

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Detailed Summary Page

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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)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) Mark Defabis <hr/> Mailing Address 3100 Reeves Road <hr/> City Plainfield State IN Zip Code 46168- <hr/> Purpose of Disbursement food & bev. expense Candidate Name Category/ Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: C18009IK Date of Disbursement 08 / 27 / 2009 <hr/> Amount of Each Disbursement this Period 794.40 <hr/> IN KIND: FOOD & BEV. EXPE- NSE
B.	Full Name (Last, First, Middle Initial) Eddies Restaurant <hr/> Mailing Address 3267 N.W. Shafer Dr. <hr/> City Monticello State IN Zip Code 47960- <hr/> Purpose of Disbursement food & bev. expense Candidate Name Category/ Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8721 Date of Disbursement 08 / 04 / 2009 <hr/> Amount of Each Disbursement this Period 3110.43 <hr/> FOOD & BEV. EXPENSE
C.	Full Name (Last, First, Middle Initial) Embarq <hr/> Mailing Address P.O. Box 74517 <hr/> City Atlanta State GA Zip Code 30374- <hr/> Purpose of Disbursement phone bill Candidate Name Category/ Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8689 Date of Disbursement 07 / 17 / 2009 <hr/> Amount of Each Disbursement this Period 537.69 <hr/> PHONE BILL

SUBTOTAL of Disbursements This Page (optional) ▶

4442.52

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

**SCHEDULE B (FEC Form 3)
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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)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial) Embarq <hr/> Mailing Address P.O. Box 74517 <hr/> City Atlanta State GA Zip Code 30374- <hr/> Purpose of Disbursement phone bill Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8700 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 9 / 2 0 0 9
	Amount of Each Disbursement this Period 501.72
	Category/ Type PHONE BILL
	SEE BELOW
B. Full Name (Last, First, Middle Initial) Embarq <hr/> Mailing Address P.O. Box 74517 <hr/> City Atlanta State GA Zip Code 30374- <hr/> Purpose of Disbursement phone bill Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8810 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 7 / 2 0 0 9
	Amount of Each Disbursement this Period 601.64
	Category/ Type PHONE BILL
	SEE BELOW
C. Full Name (Last, First, Middle Initial) GM Card <hr/> Mailing Address Dept. 9600 <hr/> City Carol Stream State IL Zip Code 60128- <hr/> Purpose of Disbursement see below Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8800 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 9
	Amount of Each Disbursement this Period 221.84
	Category/ Type SEE BELOW
	SEE BELOW

SUBTOTAL of Disbursements This Page (optional) ▶

1325.20

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

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

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Detailed Summary Page

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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)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) Capital Grille Mailing Address 601 Pennsylvania Ave., NW City Washington State DC Zip Code 20004- Purpose of Disbursement food & bev. expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8802 Date of Disbursement 09 / 21 / 2009 Amount of Each Disbursement this Period 17.44 [MEMO ITEM] MEMO: FOOD & BEV. EXPENSE
B.	Full Name (Last, First, Middle Initial) Huntington Bank Mailing Address 2361 Morse Road City Columbus State OH Zip Code 43229- Purpose of Disbursement truck payment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8703 Date of Disbursement 07 / 27 / 2009 Amount of Each Disbursement this Period 587.89 TRUCK PAYMENT
C.	Full Name (Last, First, Middle Initial) Huntington Bank Mailing Address 2361 Morse Road City Columbus State OH Zip Code 43229- Purpose of Disbursement truck payment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8787 Date of Disbursement 08 / 21 / 2009 Amount of Each Disbursement this Period 587.89 TRUCK PAYMENT

SUBTOTAL of Disbursements This Page (optional) ▶

1175.78

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

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

Use separate schedule(s)
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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)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) Huntington Bank Mailing Address 2361 Morse Road City Columbus State OH Zip Code 43229- Purpose of Disbursement truck payment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8803 Date of Disbursement 09 / 21 / 2009 Amount of Each Disbursement this Period 587.89 TRUCK PAYMENT	
B.	Full Name (Last, First, Middle Initial) Ind. Dept of Revenue Mailing Address 100 N. Senate Ave. City Indianapolis State IN Zip Code 46204- Purpose of Disbursement payroll taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8678 Date of Disbursement 07 / 31 / 2009 Amount of Each Disbursement this Period 67.32 PAYROLL TAXES	
C.	Full Name (Last, First, Middle Initial) Ind. Dept of Revenue Mailing Address 100 N. Senate Ave. City Indianapolis State IN Zip Code 46204- Purpose of Disbursement payroll taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8681 Date of Disbursement 07 / 31 / 2009 Amount of Each Disbursement this Period 104.82 PAYROLL TAXES	

SUBTOTAL of Disbursements This Page (optional) ▶

760.03

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

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

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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)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial) Ind. Dept of Revenue Mailing Address 100 N. Senate Ave. City Indianapolis State IN Zip Code 46204- Purpose of Disbursement payroll taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8680 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 9	
	Amount of Each Disbursement this Period 94.78	
	Category/ Type PAYROLL TAXES	
	Full Name (Last, First, Middle Initial) Ind. Dept of Revenue Mailing Address 100 N. Senate Ave. City Indianapolis State IN Zip Code 46204- Purpose of Disbursement payroll taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8785 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
Amount of Each Disbursement this Period 84.48		
Category/ Type PAYROLL TAXES	Full Name (Last, First, Middle Initial) Ind. Dept of Revenue Mailing Address 100 N. Senate Ave. City Indianapolis State IN Zip Code 46204- Purpose of Disbursement payroll taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8791 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 9
Amount of Each Disbursement this Period 136.41		
Category/ Type PAYROLL TAXES		

SUBTOTAL of Disbursements This Page (optional) ▶

315.67

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)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) Cal Johnson Mailing Address P.O. Box 671 City Folly Beach State SC Zip Code 29439- Purpose of Disbursement office rent Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8657 Date of Disbursement 07 / 01 / 2009	Amount of Each Disbursement this Period 850.00 OFFICE RENT
B.	Full Name (Last, First, Middle Initial) Cal Johnson Mailing Address P.O. Box 671 City Folly Beach State SC Zip Code 29439- Purpose of Disbursement office rent Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8710 Date of Disbursement 08 / 11 / 2009	Amount of Each Disbursement this Period 850.00 OFFICE RENT
C.	Full Name (Last, First, Middle Initial) Cal Johnson Mailing Address P.O. Box 671 City Folly Beach State SC Zip Code 29439- Purpose of Disbursement office rent Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8790 Date of Disbursement 09 / 01 / 2009	Amount of Each Disbursement this Period 850.00 OFFICE RENT

SUBTOTAL of Disbursements This Page (optional) ▶

2550.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial) Stephanie Mattix <hr/> Mailing Address 200 N. Main St. <hr/> City Monticello State IN Zip Code 47960- <hr/> Purpose of Disbursement payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8704 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 873.16
	Category/Type PAYROLL
	State: District:
B. Full Name (Last, First, Middle Initial) Stephanie Mattix <hr/> Mailing Address 200 N. Main St. <hr/> City Monticello State IN Zip Code 47960- <hr/> Purpose of Disbursement payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8784 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 1574.38
	Category/Type PAYROLL
	State: District:
C. Full Name (Last, First, Middle Initial) Stephanie Mattix <hr/> Mailing Address 200 N. Main St. <hr/> City Monticello State IN Zip Code 47960- <hr/> Purpose of Disbursement payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8793 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 1574.38
	Category/Type PAYROLL
	State: District:

SUBTOTAL of Disbursements This Page (optional) ▶	4021.92
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)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial)
Monticello Custom Frame & Gallery

Mailing Address 101 W. Broadway

City Monticello State IN Zip Code 47960-

Purpose of Disbursement
framing expense

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: E8804

Date of Disbursement

/ /

Amount of Each Disbursement this Period

FRAMING EXPENSE

B. Full Name (Last, First, Middle Initial)
Monticello Water & Sewer Departments

Mailing Address P.O. Box 384

City Monticello State IN Zip Code 47960-

Purpose of Disbursement
water bill

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: E8709

Date of Disbursement

/ /

Amount of Each Disbursement this Period

WATER BILL

C. Full Name (Last, First, Middle Initial)
Morgan, Meredith & Assoc.

Mailing Address 2875 Towerview Road
Suite 100

City Herndon State VA Zip Code 20171-

Purpose of Disbursement
fundraiser consultant

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: E8717

Date of Disbursement

/ /

Amount of Each Disbursement this Period

FUNDRAISER CONSULTANT

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)

<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)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) Muirfield Village Golf Club Mailing Address 5750 Memorial Drive City Dublin State OH Zip Code 43017- Purpose of Disbursement facilities for fundraiser Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8809 Date of Disbursement 09 / 21 / 2009 Amount of Each Disbursement this Period 5692.52 FACILITIES FOR FUNDRAISER
B.	Full Name (Last, First, Middle Initial) Paypal Mailing Address City State Zip Code Purpose of Disbursement fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8654 Date of Disbursement 07 / 05 / 2009 Amount of Each Disbursement this Period 0.36 FEE
C.	Full Name (Last, First, Middle Initial) Postmaster Mailing Address 125 W. Broadway City Monticello State IN Zip Code 47960- Purpose of Disbursement postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8658 Date of Disbursement 07 / 09 / 2009 Amount of Each Disbursement this Period 132.00 POSTAGE

SUBTOTAL of Disbursements This Page (optional) ▶	5824.88
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: (check only one)

<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)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) Postmaster	Transaction ID: E8795 Date of Disbursement
	Mailing Address 125 W. Broadway	<input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2009"/>
	City Monticello State IN Zip Code 47960-	Amount of Each Disbursement this Period
	Purpose of Disbursement postage	<input type="text" value="44.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		POSTAGE

B.	Full Name (Last, First, Middle Initial) Super Test Service Stations	Transaction ID: E8714 Date of Disbursement
	Mailing Address 305 W. Broadway Street	<input type="text" value="08"/> / <input type="text" value="04"/> / <input type="text" value="2009"/>
	City Monticello State IN Zip Code 47960-	Amount of Each Disbursement this Period
	Purpose of Disbursement gasoline	<input type="text" value="164.41"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		GASOLINE

C.	Full Name (Last, First, Middle Initial) Super Test Service Stations	Transaction ID: E8727 Date of Disbursement
	Mailing Address 305 W. Broadway Street	<input type="text" value="08"/> / <input type="text" value="21"/> / <input type="text" value="2009"/>
	City Monticello State IN Zip Code 47960-	Amount of Each Disbursement this Period
	Purpose of Disbursement gasoline	<input type="text" value="149.84"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		GASOLINE

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="358.25"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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)
Hoosiers Supporting Buyer For Congress

A.

Full Name (Last, First, Middle Initial)
The Stationairs Express

Mailing Address 224 North Main Street

City Monticello State IN Zip Code 47960-

Purpose of Disbursement office supplies
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: E8716
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	4		2	0	0	9

Amount of Each Disbursement this Period

288.88

OFFICE SUPPLIES

B.

Full Name (Last, First, Middle Initial)
Tippecanoe Country Club

Mailing Address P.O. Box 113

City Monticello State IN Zip Code 47960-

Purpose of Disbursement facilities for fundraiser
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: E8720
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	4		2	0	0	9

Amount of Each Disbursement this Period

2838.00

FACILITIES FOR FUNDRAISER

C.

Full Name (Last, First, Middle Initial)
United Parcel Service

Mailing Address P.O. Box 85036

City Louisville State KY Zip Code 40285-5036

Purpose of Disbursement shipping
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: E8715
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	4		2	0	0	9

Amount of Each Disbursement this Period

381.55

SHIPPING

SUBTOTAL of Disbursements This Page (optional) ▶

3508.43

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

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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)
Hoosiers Supporting Buyer For Congress

<p>A. Full Name (Last, First, Middle Initial) United Parcel Service</p> <p>Mailing Address P.O. Box 85036</p> <p>City Louisville State KY Zip Code 40285-5036</p> <p>Purpose of Disbursement shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: E8783</p> <p>Date of Disbursement</p> <p><input type="text" value="08"/> / <input type="text" value="24"/> / <input type="text" value="2009"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="17.84"/></p> <p>SHIPPING</p>
<p>B. Full Name (Last, First, Middle Initial) USAA Credit Card</p> <p>Mailing Address 10750 McDermott Fwy</p> <p>City San Antonio State TX Zip Code 78288-</p> <p>Purpose of Disbursement see below</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: E8683</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2009"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="155.69"/></p> <p>SEE BELOW</p>
<p>C. Full Name (Last, First, Middle Initial) Battlefield</p> <p>Mailing Address 5851 St. Rd. 43 N.</p> <p>City West Lafayette State IN Zip Code 47906-</p> <p>Purpose of Disbursement gasoline</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: E8688</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2009"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="40.54"/></p> <p>[MEMO ITEM] MEMO: GASOLINE</p>

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)

<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)
Hoosiers Supporting Buyer For Congress

<p>A. Full Name (Last, First, Middle Initial) USAA Credit Card</p> <p>Mailing Address 10750 McDermott Fwy</p> <p>City San Antonio State TX Zip Code 78288-</p> <p>Purpose of Disbursement gasoline</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: E8805</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="21"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="77.86"/></p> <p>GASOLINE</p>
<p>B. Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address P.O. Box 630024</p> <p>City Lafayette State IN Zip Code 47901-</p> <p>Purpose of Disbursement cell phone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: E8719</p> <p>Date of Disbursement</p> <p><input type="text" value="08"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="81.66"/></p> <p>CELL PHONE</p>
<p>C. Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address P.O. Box 630024</p> <p>City Lafayette State IN Zip Code 47901-</p> <p>Purpose of Disbursement cell phone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: E8722</p> <p>Date of Disbursement</p> <p><input type="text" value="08"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="353.88"/></p> <p>CELL PHONE</p>

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)

PAGE 89 / 92

<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)
Hoosiers Supporting Buyer For Congress

<p>A. Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address P.O. Box 630024</p> <p>City Lafayette State IN Zip Code 47901-</p> <p>Purpose of Disbursement cell phone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: E8725</p> <p>Date of Disbursement</p> <p><input type="text" value="08"/> <input type="text" value="21"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="84.21"/></p> <p>CELL PHONE</p>
<p>B. Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address P.O. Box 630024</p> <p>City Lafayette State IN Zip Code 47901-</p> <p>Purpose of Disbursement cell phone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: E8797</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="02"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="404.00"/></p> <p>CELL PHONE</p>
<p>C. Full Name (Last, First, Middle Initial) Wells Fargo</p> <p>Mailing Address 119 North Main Street</p> <p>City Monticello State IN Zip Code 47960-6748</p> <p>Purpose of Disbursement payroll taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: E8691</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="433.12"/></p> <p>PAYROLL TAXES</p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="921.33"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 90 / 92

<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)
Hoosiers Supporting Buyer For Congress

A. Full Name (Last, First, Middle Initial) Wells Fargo Mailing Address 119 North Main Street City Monticello State IN Zip Code 47960-6748 Purpose of Disbursement payroll taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8708 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 9
	Amount of Each Disbursement this Period 433.12
	Category/ Type PAYROLL TAXES
	PAYROLL TAXES
B. Full Name (Last, First, Middle Initial) Wells Fargo Mailing Address 119 North Main Street City Monticello State IN Zip Code 47960-6748 Purpose of Disbursement payroll taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8794 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 4 / 2 0 0 9
	Amount of Each Disbursement this Period 658.82
	Category/ Type PAYROLL TAXES
	PAYROLL TAXES
C. Full Name (Last, First, Middle Initial) Eric Woolf Mailing Address 200 North Main Street City Monticello State IN Zip Code 47960- Purpose of Disbursement payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8702 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 795.00
	Category/ Type PAYROLL
	PAYROLL

SUBTOTAL of Disbursements This Page (optional) ▶

1886.94

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

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

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

FOR LINE NUMBER: (check only one)

<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)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) Eric Woolf	Transaction ID: E8781 Date of Disbursement 08 / 31 / 2009
	Mailing Address 200 North Main Street	Amount of Each Disbursement this Period 795.00
	City Monticello State IN Zip Code 47960-	
	Purpose of Disbursement payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL
B.	Full Name (Last, First, Middle Initial) Eric Woolf	Transaction ID: E8792 Date of Disbursement 09 / 30 / 2009
	Mailing Address 200 North Main Street	Amount of Each Disbursement this Period 795.00
	City Monticello State IN Zip Code 47960-	
	Purpose of Disbursement payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

SUBTOTAL of Disbursements This Page (optional)

1590.00

TOTAL This Period (last page this line number only)

58594.70

**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 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 checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Hoosiers Supporting Buyer For Congress

A.	Full Name (Last, First, Middle Initial) Friends of the NRA Mailing Address City State Zip Code Purpose of Disbursement DINNER TICKETS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8786 Date of Disbursement 08 / 27 / 2009 Amount of Each Disbursement this Period 250.00 Category/ Type
B.	Full Name (Last, First, Middle Initial) John Dennis for Mayor Mailing Address P.O. Box 2263 City State Zip Code West Lafayette IN 47906- Purpose of Disbursement CONTRIBUTION Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8679 Date of Disbursement 07 / 17 / 2009 Amount of Each Disbursement this Period 250.00 Category/ Type
C.	Full Name (Last, First, Middle Initial) Zach Wamp for Governor Mailing Address P.O. Box 23748 City State Zip Code Chattanooga TN 37422- Purpose of Disbursement CONTRIBUTION Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E8788 Date of Disbursement 08 / 24 / 2009 Amount of Each Disbursement this Period 2000.00 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	2500.00
TOTAL This Period (last page this line number only) ▶	2500.00