CERTIFIED MAIL HELLEIVER WHILE OF RECORDS & RESISTRATION REPORT OF RECEIPTS AND DISBURSEMENTS OCT 26 AN II: 15 For An Authorized Committee OBT 22 1990 U.S. HOUSE OF REFRESENTATIVES (Summary Page) 1. NAME OF COMMITTEE (in full) JSE FEC MAILING LABEL OR OR PRINT McCloskey For Congress Committee

ADDRESS (number and street) Check if different than previously reported. 2. FEC IDENTIFICATION NUMBER 100188 P.O. Box 70 IS THIS REPORT AN AMENDMENT? TYPE STATE/DISTRICT CITY, STATE and ZIP CODE P NO YES Bloomington, IN 47402 **FRE OF REPORT** General welfth day report preceding **April 15 Quarterly Report** (Type of Election) election on November 6 in the State of Indiana July 15 Quarterly Report Thirtieth day report following the General Election on October 15 Quarterly Report in the State of January 31 Year End Report **Termination Report** July 31 Mid-Year Report (Non-election Year Only) **Runoff Election** This report contains Special Election **General Election Primary Election** activity for SUMMARY **COLUMN B COLUMN A** Calendar Year-to-Date Covering Period 10-01-90 through 10-17-90 This Period Net Contributions (other than loans) 282206.03 Total Contributions (other than loans) (from Line 11(e)) 26064.98 (a) 500.00 Total Contribution Refunds (from Line 20(d)). 500.00 (b) Net Contributions (other than loans) (subtract Line 6(b) from 6(a)) . . 281706.03 25564.98 (c) **Net Operating Expenditures** 7. Total Operating Expenditures (from Line 17). 253405.62 27849.36 (a) Total Offsets to Operating Expenditures (from Line 14) 1250.00 0.00 (b) Net Operating Expenditures (subtract Line 7(b) from 7(a)). 27849.36 252155.62 (c) Cash on Hand at Close of Reporting Period (from Line 27) For further information 8. 81235.73 contact: Federal Election Commission Debts and Obligations Owed TO the Committee 9. 0.00 999 E Street, NW (Itemize all on Schedule C and/or Schedule D) . Washington, DC 20463 Debts and Obligations Owed BY the Committee 10. Toil Free 800-424-9530 18654.37 (Itemize all on Schedule C and/or Schedule D) . Local 202-376-3120 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 Katherine Startin Date Signature of Treasurer Resino) Startin 10-22-90 NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

(revised 4/87)

DETAILED SUMMARY PAGE of Receipts and Disbursements (Page 2, FEC FORM 3)

me of Committee (in full)	Report Covering the From: 10-01		To: 10-17-9	0
CCLoskey For Congress Committee #100188	CQLUMN A Total This Peri	Service Co.	COLUMN B Galendar Year-To-l	
. CONTRIBUTIONS (other than loans) FROM:		X		
(a) Individuals/Persons Other Than Political Committees				. X
(i) Itemized (use Schedule A)	6225.0			1.34
(ii) Uniternized	5789.	0.0		1
(iii) Total of contributions from individuals	12014.6	18	71260	
(b) Political Party Committees	0.0	00	2117 (
(c) Other Political Committees (such as PACs)	14050.0		203260.0	0.01
(d) The Candidate	0.0		0.0	
(d) The Candidate	26064.9		276637.	71 1
(e) TOTAL CONTRIBUTIONS (other than loans)(add 11(a)(iii), (b), (c) and (d))	SEMESTIC SERVICE SERVICES	-indiana	لدوريد بدرونا والمتراش والمتراث والمترا	Colorations.
2. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.0	00	0.0	101
3. LOANS:	Signature .			7-24
(a) Made or Guaranteed by the Candidate	0.0	The second seconds	0.0	20 1
· · · · · · · · · · · · · · · · · · ·	0		0.0	
(b) All Other Loans	0	April Laure Band of China		20 1
(c) TOTAL LOANS (add 13(a) and (b))	5.46.25.		ing a galance and the second	11.00
4. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.	00	1250	المو
5. OTHER RECEIPTS (Dividends, Interest, etc.)	0.	0.0	4378.	32
		apada kan	والمراجع والمتعارف والمتعارض والمتعا	ئىد <u>نەسىن</u> ت
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	26064	98	282206	03
II. DISBURSEMENTS				· La s
17. OPERATING EXPENDITURES	27849.	36	253405.	62
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.	00	0.	ω
19. LOAN REPAYMENTS:		,	to the transfer of the	00
(a) Of Loans Made or Guaranteed by the Candidate		00		~~~
(b) Of All Other Loans		00		00
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))		00		00
20. REFUNDS OF CONTRIBUTIONS TO:	SEE NAME OF	red of the first		د ۱۰۰۰ میلوفان
(a) Individuals/Persons Other Than Political Committees	500	0.0	500.	00
(b) Political Party Committees	0.	0.0	0.	00
(c) Other Political Committees (such as PACs)		00		00
(c) Other Political Committees (such as PAOs)			500	
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	SUU.			. carrie
21. OTHER DISBURSEMENTS	1000	00	4780	30
20(d) and 21)	M. St. Charles			
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	29349.	36	258685.	92
III. CASH SUMMARY				
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD		B	84520.11	
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)		\$	26064.98	
25. SUBTOTAL (add Line 23 and Line 24)		\$	110585.09	
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)		\$	29349.36	
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from	25).	\$	81235 73	

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ITEMIZED RECEIPTS

Use separate schedule(s)	PAGE	OF
for each category of the	1	3
Detailed Summary Page	FOR LINE	NUMBER
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s, other than using the name and address or any political committee to			
OF COMMITTEE (in Full)			######
Closkey For Congress Committee, P.C	D. Box 70, Bloomingt	on, IN 474	<u>02 #100188</u>
	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John & Anna McCall	Self-employed	day, year,	
R.R. 1 Box 120		70 00 00	100.00
11-i11- TN 47569		10-08-90	100.00
	Occupation		
Receipt For: Primary y General	Farmer Aggregate Year-to-Date >\$ 225.00		
Other (specify):		Date (month,	Amount of Each
B. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Period
Tobiatha Eagleson	Retired		
1009 W. 11th Street		10-10-90	100.00
Bloomington, IN 47401	Occupation	1	
Receipt For: Primary X General			
Receipt For: Primary General Other (specify):	Aggregate Year-to-Date >\$225.	00	
	Name of Employer	Date (month,	Amount of Each
C. Full Name, Mailing Address and ZIP Code		day, year)	Receipt this Perio
Dr. Frank & Becky Hrisomalos	Self-employed/	3	
1403 E. Atwater	Bloomington Hospita	-110-06-90 l	1000.00
Bloomington, IN 47401	Occupation Director		200000
Receipt For: Primary X General	Physician/Social Se		
Other (specify):	Aggregate Year-to-Date >\$ 100		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of Eac
Katina Hrisomalos		day, year)	Receipt this Peri
228 S. Hillsdale	Retired	10-06-90	500.00
Bloomington, IN 47401			
	Occupation	1	
Receipt For: Primary X General	Annual Value of Data	0.0	
Other (specify):	Aggregate Year-to-Date >\$500	Date (month,	Amount of Eac
E. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Per
Andrew Steffen	Self-employed	10-10-90	125.00
R.R. 2 Box 308	Pett-embroked		123.00
Monrovia, IN 46157	Occupation	1	
Consol	Attorney		
Receipt For: Primary X General	Aggregate Year-to-Date >\$325	.00	1
Other (specify):	Name of Employer	Date (month,	Amount of Ea
F. Full Name, Mailing Address and ZIP Code	Marite of Ettibroker	day, year)	Receipt this Pe
Dennis & Patty Dewey	Self-employed		
18 Old Orchard Road Darby Hills		10-04-90	100.00
Newburgh, IN 47630	Occupation	10-04-90	100.00
	Attorney		1
Receipt For: Primary X General Other (specify):	Aggregate Year-to-Date >\$232	.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of Ea
I G. Full Name, Mailing Address and Air Code		day, year)	Receipt this Pe
	Self-employed		
Joe & Gladys Traylor		110 15 00	100.00
Joe & Gladys Traylor Box 68		10-15-90	
Joe & Gladys Traylor	Occupation	10-15-90	
Joe & Gladys Traylor Box 68 Montgomery, IN 47558	Farmer		
Joe & Gladys Traylor Box 68 Montgomery, IN 47558 Receipt For: Primary X General			
Joe & Gladys Traylor Box 68 Montgomery, IN 47558	Farmer		2025.0

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER 11 (a) (i)

Loskey For Congress Committee, P. A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Eac Receipt this Per
James Burch R.R. 4	Midwest Engineers	10-08-90	100.00
Loogootee, IN 47553	Occupation	10-08-90	100.00
Receipt For: Primary X General	Engineer		
Other (specify):	Aggregate Year-to-Date >\$ 300.	Date (month,	Amount of Eac
B. Full Name, Mailing Address and ZIP Code	Name of Employer Metcor	day, year)	Receipt this Per
James Muldoon		10-08-90	500.00
2000 P Street NW Washington, D.C. 20036	Occupation	-	
Receipt For: Primary X General	Corporate Executive		
Other (specify):	Aggregate Year-to-Date >\$ 1000	,00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea Receipt this Per
Valerie Hill		201, 100.1	a v = marquis server d. Wi
1565 Colonial Terrace, No.204	Metcor	10-08-90	500.00
Arlington, VA 22209	Occupation		
Receipt For: Primary X General	Administrative Ass		
Other (specify):	Aggregate Year-to-Date >\$ 500	Date (month,	Amount of E
D. Full Name, Mailing Address and ZIP Code	Matta of Embloker	day, year)	Receipt this Pe
Linda J. Kessler 1855 Calvert Street NW, No.400	Metcor	10-08-90	500.0
Washington, D.C. 20009	Occupation		
Receipt For: Primary X General	Consultant Aggregate Year-to-Date >\$ 500		
Other (specify):	Name of Employer	Date (month,	Amount of E
E. Full Name, Mailing Address and ZIP Code	Hadile Of Curbioles	day, year)	Receipt this P
Lorraine & Robert Galloway	Wataan	10-08-90	1000.0
2000 P Street NW, Suite 505 Washington, D.C. 20036	Metcor	- - " "	
	Occupation Consultant		
Receipt For: Primary X General Other (specify):	Aggregate Year-to-Date >\$ 100	0.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of E Receipt this F
James & Wilma White	*Best Effort: We	day, year)	
1634 E. Smithville Road	request this	10-15-90	100.0
Bloomington, IN 47401	information with Occupation fundraising		-
Receipt For: Primary X General	offort		
Other (specify):	effort Aggregate Year-to-Date >\$ 225		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of I Receipt this I
Bertha Pfautch 3416 Alabama Avenue	Homemaker	10-08-90	1000.0
Alexandria, VA 22305	Occupation		
Receipt For: Primary X General	Aggregate Year-to-Date >\$ 1.00	00.00	
Other (specify):	Walicagra i con-ro-pare 2 [[]	<u> </u>	3700.0

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER

11 (a) (i)

A. Full Name, Mailin	g Address and ZIP Code		O. Box 70, Bloomi Name of Employer	Date (month, day, year)	Amount of Ea Receipt this Pe
Scott Blake 3409 Fulto	n Street NW		Metcor	10-08-90	500.00
Washington	, D.C. 200	07	Occupation		
Receipt For:	Primary	X General	Consultant		
Other (sp	ecify):		Aggregate Year-to-Date >\$ 5	500.00	
B. Full Name, Mailir	g Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Ea Receipt this Pe
	Primary	General	Occupation		
Receipt For:	<u></u>		Aggregate Year-to-Date >\$		
	ng Address and ZIP Cod	9	Name of Employer	Date (month, day, year)	Amount of E Receipt this Po
Receipt For:	Primary	General	Occupation		
Other (s	<u> </u>		Aggregate Year-to-Date >\$		····
			Occupation		
Receipt For:	Primary pecify):	General	Aggregate Year-to-Date >\$		
	ing Address and ZIP Coo	ie	Name of Employer	Date (month, day, year)	Amount of Receipt this
į.	Primary	General	Occupation		
					1
Receipt For:		L.J	Aggregate Year-to-Date >\$		
Other	(specify):		Name of Employer	Date (month, day, year)	Amount of Receipt this
F. Full Name, Ma	(specify):	da	7.38.5	Date (month,	
F. Full Name, Ma	(specify):		Name of Employer	Date (month, day, year)	
P. Full Name, Ma	(specify): Iling Address and ZIP Co	de General	Name of Employer Occupation	Date (month, day, year)	Receipt this
Receipt For: Other	(specify): Iling Address and ZIP Co Primary (specify): Iling Address and ZIP Co	de General	Name of Employer Occupation Aggregate Year-to-Date > S	Date (month, day, year) Date (month,	Receipt this
Receipt For: G. Full Name, Ma	(specify): Iling Address and ZIP Co Primary (specify):	de General	Name of Employer Occupation Aggregate Year-to-Date > S Name of Employer	Date (month, day, year) Date (month, day, year)	

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER 11 (c)

loskey For Congress Committee, P.O	A FI-ver	Date (month,	Amount of Each
A. Full Name, Mailing Address and Ell Sous	Name of Employer	day, year)	Receipt this Period
IE GOOD GOVETIMENTO OTTO	Fred Koch,	10-15-90	500.00
850 M Street NW, #1200	Treasurer		
	Occupation		
Receipt For: Primary X General	Aggregate Year-to-Date >\$ 500	00	
Other (specify):	Name of Employer	Date (month,	Amount of Each
D. Full Hattie, maining management	Arthur Coia,	day, year)	Receipt this Period
Laborers' Political League		10-08-90	1000.00
905 16th Street NW	Treasurer		
Washington, D.C. 20006	Occupation		
Receipt For: Primary X General			
Other (specify):	Aggregate Year-to-Date >\$ 4200		A
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Perio
NRLCA PAC	Dallas Fields,		• • • • • • • • • • • • • • • • • • • •
1448 Duke Street, Suite 100	President	10.04.00	500.00
Alexandria, VA 22314	Occupation	10-04-90	500.00
	Coupelion		
	Aggregate Year-to-Date >\$ 500	00	
Other (specify):	Name of Employer	Date (month,	Amount of Each
D. Full Name, Mailing Address and ZIP Code	D.R. Manfred,	day, year)	Receipt this Perio
Alcoa Employees Political Fund	Treasurer		
1501 Alcoa Building Pittsburg, PA 15219		10-04-90	1000.00
1120000429/ 112	Occupation		
Receipt For: Primary X General	Aggregate Year-to-Date >\$2000		
Other (specify):	Name of Employer	Date (month,	Amount of Eac
E. Full Name, Mailing Address and ZIP Code		day, year)	Receipt this Peri
Graphic Communications Int'l Unio	Michael McNally,		
Political Action Committee	Treasurer	10-08-90	500.00
1900 L Street NW	Occupation		
Washington, D.C. 20036 Receipt For: Primary X General			
Other (specify):	Aggregate Year-to-Date >\$ 500	_00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of Each
United Technologies PAC	Donald Groce,	day, year)	neceipt tills rei
1825 Eye Street NW, Suite 700	Treasurer	10-08-90	100.00
Washington, D.C. 20006		-	
Mashing con, 200	Occupation		
Receipt For: Primary X General	Aggregate Year-to-Date >\$ 160	0.00	
Other (specify):	Name of Employer	Date (month,	Amount of Ea
G. Full Name, Mailing Address and ZIP Code		day, year)	Receipt this Pe
INBELLPAC	R.A. Brentlinger,		
240 North Meridian Street	Treasurer	10-08-90	750.00
Indianapolis, IN 46204	Occupation		
Receipt For: Primary X General			1
Other (specify):	Aggregate Year-to-Date >\$ 750	· · · · · · · · · · · · · · · · · · ·	1
		\	4350.0

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page PAGE OF 2 3 FOR LINE NUMBER 11 (c)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of E
Coal Miners PAC 900 15th Street NW	John Banovic, Treasurer	10-15-90	1000.0
Washington, D.C. 20005			
	Occupation		
Receipt For: Primary X General Other (specify):	Aggregate Year-to-Date >\$ 5700	0.0	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea
Engineers Political Education	Frank Hanley,	day, year,	· (tato)pt ano · ·
Committee 1125 Seventeenth Street NW	Treasurer	70 70 00	E00 00
Washington, D.C. 20036	Occupation	10-10-90	500.00
Receipt For: Primary X General	Aggregate Year-to-Date >\$ 2500	1-00	
Other (specify):	Name of Employer	Date (month,	Amount of E
C. Full Name, Mailing Address and ZIP Code Carpenters' Legislative Improvem		day, year)	Receipt this P
Committee	Treasurer	10-04-90	500.00
101 Constitution Avenue	Occupation		
Washington, D.C. 20001 Receipt For: Primary X General			
Other (specify):	Aggregate Year-to-Date >\$ 6000		A
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of a Receipt this P
OLBANK PAC 420 Main Street	Kevin Heldman,		
Evansville, IN 47708	Treasurer	10-15-90	500.00
	Occupation		
Receipt For: Primary X General Other (specify):	Aggregate Year-to-Date >\$ 500	0.0	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Receipt this
Hawn Sugar PAC	Helen Berg,		•
1511 K Street NW	Treasurer	10-08-90	500.0
Washington, D.C. 20005	Occupation		
Receipt For: Primary X General Other (specify):	Aggregate Year-to-Date >\$ 500	00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of
General Motors Civic Involvemen		day, year)	Receipt this
1660 L Street NW Program	Treasurer	10-08-90	200.0
Washington, D.C. 20036	Occupation	7	
Receipt For: Primary X General			
Other (specify):	Aggregate Year-to-Date >\$ 200	Date (month.	Amount of
G. Full Name, Mailing Address and ZIP Code	Name of Employer Thomas Donahue,	day, year)	Receipt this
AFL-CIO COPE 815 16th Street NW	Treasurer		
Washington, D.C. 20006		10-04-90	1500.0
	Occupation		
Receipt For: Primary X General Other (specify):	Aggregate Year-to-Date >\$ 450	0.00	<u> </u>

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER

14050.00

11(c) Any information dopied 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) McCloskey For Congress Committee, P.O. Box 70, Bloomington, IN 47402 #100188 Amount of Each Name of Employer Date (month, A. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Gary Atwell, Textron PAC 1090 Vermont Avenue NW, Suite 110 Treasurer 500.00 10-08-90 20005 Washington, D.C. Occupation X General Primary Receipt For: Aggregate Year-to-Date >\$ 1000.00 Other (specify): Amount of Each Date (month, B. Full Name, Mailing Address and ZIP Code Name of Employer Receipt this Period day, year) John Autry, Unisys Employees PAC 2001 L Street NW, Suite 1000 Treasurer 10-08-90 500.00 20036 Washington, D.C. Occupation X General Receipt For: Primary Aggregate Year-to-Date >\$ 800.00 Other (specify): Amount of Each Name of Employer Date (month, C. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Joint Action Committee For Politi .cal Marcia Balonick, Affairs 500.00 10-04-90 Treasurer P.O. Box 105 Occupation 60035 IL Highland Park, X General Primary Receipt For: Aggregate Year-to-Date >\$ 1500.00 Other (specify): Amount of Each Name of Employer Date (month.) D. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Leland Sparks, ElectroCom Automation PAC 10-08-90 500.00 Treasurer P.O. Box 95080 76005 Arlington, TX Occupation X General Receipt For: Primary Aggregate Year-to-Date >\$ 500.00 Other (specify): Amount of Each Name of Employer Date (month. E. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Pamela Powers, CONTEL PAC Treasurer 555 13th Street NW 10-08-90 2500.00 20004 Washington, D.C. Occupation X General Primary Receipt For: Aggregate Year-to-Date >\$2500.00 Other (specify): Amount of Each Date (month, Name of Employer F. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) **Refunded--see Systemhouse Inc. Schedule B, 1 of 1, 10-15-90 500.00 1010 N. Glebe Road Line 20(a) **Refunded Arlington, VA 22210 Occupation 10-15-90 General Primary Receipt For: Aggregate Year-to-Date >\$ Other (specify): Amount of Each Date (month, Name of Employer G. Full Name, Mailing Address and ZIP Code day, year) Receipt this Period Occupation Receipt For: Primary Aggregate Year-to-Date >> \$ Other (specify): SUBTOTAL of Receipts This Page (optional) 5000.00

ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER

17

<u></u>	AME OF COMMITTEE (in Full)			
/	McCloskey For Congress Committe	ee, P.O. Box 70, Bloomin	aton, IN	474 02 #100188
	A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	American Express Suite 0001 Chicago, IL 60679-0001	Travel Expenses Disbursement for: Primary X General Other (specify)	10-05-90	187.75
	B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Bate (month, day, year)	Amount of Each Disbursement This Period
	AT & T P.O. Box 85950 Louisville, KY 40285	Telephone Disbursement for: Primery X General Other (specify)	10-08-90 10-08-90	47.52 645.91
	C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Axelrod & Associates 730 N. Franklin, Suite 404 Chicago, IL 60610		10-04-90 10-11-90	8145.25 9942.55
<u>ም</u>	D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Printing	Date (month, day, year)	Amount of Each Olsbursement This Period
r 04.	Burkert Walton, Inc. 601 W. Eichel Avenue Evansville, IN 47710	Disbursement for: Primary X General Other (specify)	10-08-90	145.00
5	E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Headquarters' Rent	Date (month, day, year)	Amount of Each Disbursement This Period
<u>~</u>	Citizens Realty P.O. Box 99 Evansville, IN 47701	Disbursement for: Primary X General Other (specify)	10-08-90	300.00
<u></u>	F. Full Name, Mailing Address and ZIP Code Ellis Floral 304 E. Kirkwood Avenue Bloomington, IN 47401	Purpose of Disbursement Tent Rental Fundraiser Expense Disbursement for: Primary X General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C C	G. Full Name, Mailing Address and ZIP Code Guttermuth & Denny Inc. 1907 Bardstown Road	Purpose of Disbursement Signs: Linear	Date (month, day, year)	Amount of Each Disbursement This Period
	Louisville, KY 40205	Disbursement for: Primary X General Other (specify)	10-01-90	830.80
	H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	House Restaurant Administration B361 Rayburn Washington, D.C. 20515	Food Disbursement for: Primary X Genera Other (specify)	10-08-90	75.15
	1. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Indiana Bell Telephone 220 N. Meridian Indianapolis, IN 46204	Telephone Disbursement for: Primary X General Other (specify)	10-08-90	450.33
5	SUBTOTAL of Disbursements This Page (optional)			20982.36
-	FOTAL This Period (last page this line number only)			

ITEMIZED DISBURSEMENTS

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER

Detailed SURVINARY Page 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) McCloskey For Congress Committee, P.O. Box 70, Bloomington, IN 47402 #100188 Date (month, Amount of Each Purpose of Disbursement A. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) Photography Services John Blair Photo 1019 Bellemeade Avenue Disbursament for: | Primary X | General 10=08-90 585.75 Evansville, IN 47714 Other (specify) Purpose of Disbursement
Travel Expenses-Date (month, Amount of Each B. Full Name, Mailing Address and ZIP Code **Disbursement This Period** day, year) Reimbursement 10=01-90 735.98 Katherine Startin 10-15-90 405.67 Disbursement for: | Primary X | General Route 2 Box 141 Other (specify) Velpen, IN 47590 Amount of Each Purpose of Disbursement Date (month, C. Full Name, Mailing Address and ZIP Code Disbursement This Period day, your) Phone Expense Katherine Startin Reimbursement 10-01-90 159.11 R.R. 2 Box 141 X General Primary Disbursement for: Velpen, IN 47590 Other (specify) Data (month, Amount of Each Purpose of Disbursement D. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) Copier Rental Killion Office Products 10-08-90 200.00 P.O. Box 482 X General Primary Disbursement for: 47501 Washington, IN Other (specify) Date (month, Amount of Each Purpose of Disbursement E. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) Food- Fundraiser **1** Kroger Grocery Expense Jackson Creek Shopping Center X General 10-05-90 Disbursement for: Primary 175.83 Bloomington, IN 47401 Other (specify) Date (month, Amount of Each Purpose of Disbursement F. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) Fundraiser Expenses Master Rental 10-01-90 212.16 2002 W. 3rd Street Primary 10-06-90 Disbursement for: 94.03 Bloomington, IN 47403 10-08-90 33.65 Other (specify) Amount of Each Date (month, Purpose of Disbursement G. Full Name, Mailing Address and ZIP Code day, year} Disbursement This Period Travel Expense Melinda Plaisier 10-06-90 364.18 Reimbursement 3617 Post Road X General Disbursement for: Primary 47408 Bloomington, IN Other (specify) Date (month. Amount of Each Purpose of Disbursement H. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) Phone : Expense Melinda Plaisier 10-06-90 20.45 Reimbursement 3617 Post Road X General Disbursement for: Primary 47408 Bloomington, IN Other (specify) Amount of Each Date (month, Purpose of Disbursement I. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) Supplies Office Depot 100.37 10-08-90 1380 N. Green River Road X General Disbursement for: Primary Evansville, IN 47715 Other (specify) 3087.18 SUBTOTAL of Disbursements This Page (optional)

ITEMIZED DISBURSEMENTS

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

3 3 3

FOR LINE NUMBER

1.7

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month,	Amount of Ea
R.J. Phelps & Hilliard P.O. Box 1311 Bloomington, IN 47402	Headquarters . Rent Disbursement for: Primary X General Other (specify)		Disbursement This
B. Full Name, Mailing Address and ZIP Code R.J. Phelps & Hilliard	Purpose of Disbursement Headquarters: Utilities		Amount of Ea Disbursement This
P.O. Box 1311 Bloomington, IN 47402	Disbursement for: Primary X General Other (specify)	10-08-90	206.09
C. Full Name, Mailing Address and ZIP Code Ricki Jo Hoffman	Purpose of Disbursement Rent & Utilities	Date (month, day, year)	Amount of Ea
1056 Madison Evansville, IN 47713	Disbursement for: Primary X General Other (specify)	10-09-90	230.00
D. Full Name, Mailing Address and ZIP Code Riverhouse Hotel	Purpose of Disbursement	Date (month, day, year)	Amount of E Disbursement Thi
20 Walnut Street Evansville, IN 47708	Reception Expense Disbursement for: Primary X General Other (specify)	10-08-90	1103.71
E. Full Name, Mailing Address and ZIP Code Rob Deppert	Purpose of Disbursement Travel Expense	Date (month, day, year)	Amount of E Disbursement Thi
1354 College Mall Road Bloomington, IN 47401	Reimbursement Disbursement for: Primary X General Other (specify)	10-04-90	69.82
F. Full Name, Mailing Address and ZIP Code Southern IN Gas & Electric C	Purpose of Disbursement o. Headquarters! Utilities	1	Amount of E Disbursement Th
20 N.W. 4th Street Evansville, IN 47741	Disbursement for: Primary General Other (specify)	10-08-90	210.9
G. Full Name, Mailing Address and ZIP Code Target	Purpose of Disbursement Fundraiser Supplies	Date (month, day, year)	Amount of E Disbursement Th
College Mall Bloomington, IN 47401	Disbursement for: Primary X General Other (specify)	10-05-90	37.7
H. Full Name, Mailing Address and ZIP Code U.S. Postmaster	Purpose of Disbursement Postage	Date (month, day, year)	Amount of 8 Disbursement Th
Bloomington, IN 47401	Disbursement for: Primary X General Other (specify)	10-04-90 10-08-90 10-11-90	108.7
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Disbursement Ti
U.S. Postmaster Bloomington, IN 47401	Postage Disbursement for: Primary X General Other (specify)	10-15-90 10-15-90	The state of the s
BTOTAL of Disbursements This Page (optional)	•••••		2765.2

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summery Page PAGE OF 1 1 1 1 POR LINE NUMBER 20 (a)

20(a) Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of foliciting 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) McCloskey For Congress Committee, P.O. Box 70, Bloomington, IN 47402 #100188 Amount of Each Purpose of Disbursement A. Full Name, Mailing Address and ZIP Code **Disbursement This Period** day, year) Refunded contribution Systemhouse Inc. in full 1010 N. Glebe Road 500.00 10-15-90 Primary Disbursement for: Arlington, VA 22210 Other (specify) Amount of Each Dété (month, Purpose of Disbursement B. Full Name, Mailing Address and ZIP Code day, year) Disbursement This Period Primary General Disbursement for: Other (specify) Dête (month, Amount of Each Purpose of Disbursement C. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) General Primary Disbursement for: Other (specify) Purpose of Disbursement Date (month, Amount of Each D. Full Name, Mailing Address and ZIP Code **Disbursement This Period** day, year) 0 General Disbursement for: Primary Other (specify) Purpose of Disbursement Date (month, Amount of Each E. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) General Primary Disbursement for: Other (specify) Date (month, Amount of Each Purpose of Disbursement F. Full Name, Mailing Address and ZIP Code day, year) Disbursement This Period General Primary Disbursement for: Other (specify) Date (month. Amount of Each Purpose of Disbursament G. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) C General Primary Disbursement for: Other (specify) Date (month, Amount of Each Purpose of Disbursement H. Full Name, Mailing Address and ZIP Code day, year) Disbursement This Period Disbursement for: General Primary Other (specify) Amount of Each Purpose of Disbursement Date (month. I. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) Primary Disbursement for: Other (specify) SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only) 500.00

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER 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) McCloskey For Congress Committee, P.O. Box 70, Bloomington, IN 47402 #100188 Amount of Each A. Full Name, Mailing Address and ZIP Code Purpose of Disbursement Disbursement This Period day, year) Democratic State Committee Contribution 10-08-90 500.00 Federal Account X General Disbursement for: | Primary 634 Asylum Avenue Other (specify) Hartford, CT 06105 Date (month, Amount of Each Purpose of Disbursement B. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) Contribution Keep George Brown in Congress 500.00 10-08-90 P.O. Box 1421 Disbursement for: Primary X General 92502 Riverside, CA Other (specify) Date (month, Amount of Each Purpose of Disbursement C. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) Disbursement for: Primary Other (specify) Amount of Each Date (month, Purpose of Disbursement D. Full Name, Mailing Address and ZIP Code **Disbursement This Period** day, year) 9 Disbursement for: Primary General Other (specify) Amount of Each Date (month, Purpose of Disbursement E. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) S Primary Disbursement for: Other (specify) Date (month, Amount of Each Purpose of Disbursement F. Full Name, Mailing Address and ZIP Code day, year) Disbursement This Period General Disbursement for: Primary Other (specify) Amount of Each Date (month. Purpose of Disbursement G. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) O General Disbursement for: Primary Other (specify) Amount of Each Date (month, Purpose of Disbursement H. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) General Disbursement for: Primary Other (specify) Amount of Each Date (month, Purpose of Disbursement I. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) General Disbursement for: Primary Other (specify) SUBTOTAL of Disbursements This Page (optional) 1000.00 TOTAL This Period (last page this line number only)

DEBTS AND OBLIGATIONS Excluding Loans

Page 1 of 1 for LINE NUMBER 10 (Use separate schedules for each numbered line)

Name of Committee (in Full) #100188 McCloskey For Congress Committee P.O. Box 70, Bloomington, IN47402	Quistanding Salanes Baginning This Pariod	Amount Insurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Meiling Address and Zip Code of Debtor or Creditor Don Sattler 1107 S. Weimer Road Bloomington, IN 47408	7057.05	0.00	0.00	7057.05
Nature of Debt (Purpose): Salary				*
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Katherine Startin R.R. 2 Box 141 Velpen, IN 47590	2438.77	0.00	0.00	2438.77
Nature of Debt (Purpose): Salary				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Axelrod & Associates 730 N. Franklin Chicago, IL 60610	9158.55	0.00	0.00	9158.55
Nature of Debt (Rurpose): Consutting Fee				
Nature of Debt (Purpose):	T.Vis have			
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor	315 A 705 - 30			
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				
2) TOTAL This Period (last page this line only)				18654.3
3) TOTAL OUTSTANDING LOANS from Schedule C (last page of	nlv)			• •