

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

INDIANA REPUBLICAN STATE COMMITTEE, INC.

ADDRESS (number and street) ▼

47 S. MERIDIAN ST. SUITE 200

☐ Check if different than previously reported. (ACC)

INDIANAPOLIS

IN

46204

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00006486

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)
- ☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)
- ☐ Termination Report
(TER)

(b) Monthly
Report
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

- ☒ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

IN

5. Covering Period

M M M / D D D / Y Y Y Y Y Y

10

18

2012

through

M M M / D D D / Y Y Y Y Y Y

11

26

2012

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 Peter J. Deputy

Signature of Treasurer

Peter J. Deputy

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y

12

05

2012

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

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
10 / 18 / 2012 To: M M / D D / Y Y Y Y Y Y
11 / 26 / 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2012		56696.36
(b) Cash on Hand at Beginning of Reporting Period.....	562853.47	
(c) Total Receipts (from Line 19)	167523.84	2108001.20
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	730377.31	2164697.56
7. Total Disbursements (from Line 31)	667538.11	2101858.36
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	62839.20	62839.20
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)	17447.80	



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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Report Covering the Period:

From:

M M /

D D /

Y Y Y Y Y Y

10

18

2012

To:

M M /

D D /

Y Y Y Y Y Y

11

26

2012

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

45461.20

662014.77

(ii) Unitemized

9920.24

209403.67

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

55381.44

871418.44

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

49897.17

235277.27

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ▶

105278.61

1106695.71

12. Transfers From Affiliated/Other

Party Committees.....

26340.91

579991.66

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

13.52

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

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

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

35904.32

421300.31

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

35904.32

421300.31

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

167523.84

2108001.20

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

131619.52

1686700.89

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	35565.29	245997.48
(ii) Non-Federal Share.....	55724.72	412353.18
(b) Other Federal Operating Expenditures	7210.89	76790.49
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	98500.90	735141.15
22. Transfers to Affiliated/Other Party Committees.....	0.00	30934.70
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	13018.05
24. Independent Expenditures (use Schedule E)	11966.95	37995.37
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	33520.49	57833.05
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	5306.80
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	5306.80
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	518549.77	1221629.24
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	518549.77	1221629.24
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	667538.11	2101858.36
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	611813.39	1689505.18

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	105278.61	1106695.71
34. Total Contribution Refunds (from Line 28(d))	0.00	5306.80
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	105278.61	1101388.91
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	42776.18	322787.97
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	13.52
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	42776.18	322774.45

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

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

FOR LINE NUMBER: PAGE 6 OF 182

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. David L. Alexander

Mailing Address 502 S. 7th Street

City

Lafayette

State

IN

Zip Code

47901

FEC ID number of contributing
federal political committee.

C

Name of Employer

Seattle Mariners

Occupation

Pro Baseball Scout

Receipt For: 2010

☐ Primary
☐ Other (specify) ▼
☒ General

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 02 / 2012

Transaction ID : SA11AI.17154

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Kristin L. Altice

Mailing Address 6420 Ewing Street

City

Indianapolis

State

IN

Zip Code

46220

FEC ID number of contributing
federal political committee.

C

Name of Employer

Shiel Sexton

Occupation

Developer

Receipt For: 2010

☐ Primary
☐ Other (specify) ▼
☒ General

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 24 / 2012

Transaction ID : SA11AI.16992

Amount of Each Receipt this Period

1200.00

Full Name (Last, First, Middle Initial)

C. Robert Bartels Jr

Mailing Address 3426 S Twyckenham Dr.

City

South Bend

State

IN

Zip Code

46614

FEC ID number of contributing
federal political committee.

C

Name of Employer

Jobar Realty

Occupation

Executive

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2012

Transaction ID : SA11AI.17691

Amount of Each Receipt this Period

405.00

In-kind - October Rent (Jobar Realty Partner)

[MEMO ITEM]

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

1300.00

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

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

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

FOR LINE NUMBER: PAGE 7 OF 182

(check only one)

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

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. James Bastnagel

Mailing Address 1556 East 79th St.

City	State	Zip Code
Indianapolis	IN	46240

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

Anesthesiologist

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2012

Transaction ID : SA11AI.16917

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

B. Dwight P. Bieberich

Mailing Address 1831 Braemar Drive

City	State	Zip Code
Fort Wayne	IN	46804

FEC ID number of contributing federal political committee.

C

Name of Employer

Fort Wayne Wire Die

Occupation

Executive

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2012

Transaction ID : SA11AI.17205

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. John H. Bobe

Mailing Address 1471 N. Newell Road

City	State	Zip Code
Vincennes	IN	47591

FEC ID number of contributing federal political committee.

C

Name of Employer

McCormick Inc.

Occupation

Executive

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2012

Transaction ID : SA11AI.16931

Amount of Each Receipt this Period

300.00

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

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

620.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 182

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Dobbie Hoffman Buckler

Mailing Address 9917 Cedar Ridge Dr

City State Zip Code
 Carmel IN 46032

FEC ID number of contributing federal political committee.

C

Name of Employer

American Legion Auxiliary

Occupation

Executive

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2012

Transaction ID : SA11AI.17190

Amount of Each Receipt this Period

20.12

Full Name (Last, First, Middle Initial)

B. Dana Caldwell

Mailing Address PO Box 434

City State Zip Code
 Morristown IN 46161

FEC ID number of contributing federal political committee.

C

Name of Employer

Caldwell Gravel Sales

Occupation

Executive

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2012

Transaction ID : SA11AI.17131

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. Dennis Carnahan

Mailing Address 9809 East Wheatland Road

City State Zip Code
 Vincennes IN 47591

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

Farmer

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2012

Transaction ID : SA11AI.16889

Amount of Each Receipt this Period

50.00

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

370.12

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

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

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

FOR LINE NUMBER: PAGE 9 OF 182

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Patrick Carrico

Mailing Address 62292 Turkey Trl.

City State Zip Code
South Bend IN 46614

FEC ID number of contributing
federal political committee.

C

Name of Employer
Richmond-Master Distributors

Occupation
Executive

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2012

Transaction ID : SA11Al.17153

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. James J. Collins

Mailing Address 5261 Navajo Way

City State Zip Code
Carmel IN 46033

FEC ID number of contributing
federal political committee.

C

Name of Employer
Eli Lilly & Co.

Occupation
Executive

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 24 / 2012

Transaction ID : SA11Al.16911

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. Carol Comer

Mailing Address 10541 Dunes Ct.

City State Zip Code
Indianapolis IN 46239

FEC ID number of contributing
federal political committee.

C

Name of Employer
State of Indiana

Occupation
Government Worker

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 28 / 2012

Transaction ID : SA11Al.17061

Amount of Each Receipt this Period

1200.00

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

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

1650.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 182

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Juanita Comer

Mailing Address 2871 W. 900 S.

City State Zip Code
 Fairmount IN 46928

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Info Requested

Info Requested

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 31 2012

Transaction ID : SA11AI.17134

Amount of Each Receipt this Period

110.00

Full Name (Last, First, Middle Initial)

B. Janet Corwin

Mailing Address 150 West Warren St. #54

City State Zip Code
 Peru IN 46970

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Miami County

IV-D Administrator

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.80

Date of Receipt

M M / D D / Y Y Y Y Y
 11 09 2012

Transaction ID : SA11AI.17213

Amount of Each Receipt this Period

20.12

Full Name (Last, First, Middle Initial)

C. George T. Dodd

Mailing Address 12211 Harvest Bay Dr.

City State Zip Code
 Ft. Wayne IN 46845

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Baker & Daniels

Attorney

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 19 2012

Transaction ID : SA11AI.16880

Amount of Each Receipt this Period

45.00

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

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

175.12

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 182

(check only one)

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

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Richard W. Dyke

Mailing Address 542 W. 83rd St.

City	State	Zip Code
Indianapolis	IN	46260

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2012

Transaction ID : SA11AI.17031

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. Jack W. Ellis

Mailing Address 502 W. Woodridge Dr.

City	State	Zip Code
Bloomington	IN	47408

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2012

Transaction ID : SA11AI.17460

Amount of Each Receipt this Period

150.00

Best Efforts Memo

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Jack W. Ellis

Mailing Address 502 W. Woodridge Dr.

City	State	Zip Code
Bloomington	IN	47408

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2012

Transaction ID : SA11AI.17461

Amount of Each Receipt this Period

150.00

Best Efforts Memo

[MEMO ITEM]

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

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

200.00

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

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

FOR LINE NUMBER: PAGE 12 OF 182

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Donald Fesko

Mailing Address 1216 Ballybunion St

City State Zip Code
Munster IN 46311

FEC ID number of contributing federal political committee.

C

Name of Employer
Community Healthcare Systems

Occupation
Executive

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 24 / 2012

Transaction ID : SA11AI.16912

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. John R. Gibbs

Mailing Address 10923 Sedgemoor Circle

City State Zip Code
Carmel IN 46032

FEC ID number of contributing federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2012

Transaction ID : SA11AI.17087

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

C. Robert T. Goad

Mailing Address 845 West 116th St.

City State Zip Code
Carmel IN 46032

FEC ID number of contributing federal political committee.

C

Name of Employer
Diamond Management

Occupation
Executive

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 24 / 2012

Transaction ID : SA11AI.16963

Amount of Each Receipt this Period

2500.00

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

3600.00

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

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Robert S. Gregory

Mailing Address 1058 Tinch Rd.

City State Zip Code
 Mooresville IN 46158

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Info Requested

Info Requested

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 24 2012

Transaction ID : SA11AI.16920

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. John R. Hammond III

Mailing Address 612 E. 13th Street

City State Zip Code
 Indianapolis IN 46202

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Ice Miller

Attorney

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2775.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 24 2012

Transaction ID : SA11AI.16952

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Deana R. Haworth

Mailing Address 499 White Oak Lane

City State Zip Code
 Greenwood IN 46142

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Hirons & Company

Executive

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 19 2012

Transaction ID : SA11AI.16899

Amount of Each Receipt this Period

400.00

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

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

1500.00

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Mark E Hayes

Mailing Address 575 Pope Place, Apt. J

City State Zip Code
Indianapolis IN 46202

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.S. Senator Dick Lugar

Occupation
State Director

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.20

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 07 / 2012

Transaction ID : SA11AI.17191

Amount of Each Receipt this Period

20.12

Full Name (Last, First, Middle Initial)

B. William W. Heath

Mailing Address 2942 Sonata CT

City State Zip Code
West Lafayette IN 47906

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 02 / 2012

Transaction ID : SA11AI.17156

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Michael B. Hine

Mailing Address 102 Cherokee Ln.

City State Zip Code
Noblesville IN 46062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
IT Management

Receipt For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.32

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2012

Transaction ID : SA11AI.17216

Amount of Each Receipt this Period

20.12

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

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

140.24

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Frank A. Hoffman

Mailing Address 11583 Trail Ridge Place

City State Zip Code
Zionsville IN 46077

FEC ID number of contributing
federal political committee.

C

Name of Employer

Krieg DeVault

Occupation

Attorney

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 02 / 2012

Transaction ID : SA11AI.17172

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Lois Humphrey

Mailing Address 1512 Lawrence Way

City State Zip Code
Anderson IN 46013

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 19 / 2012

Transaction ID : SA11AI.16896

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

C. Wilbur H. Ingels

Mailing Address 21824 Greenwood Drive

City State Zip Code
Lawrenceburg IN 47025

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 24 / 2012

Transaction ID : SA11AI.17017

Amount of Each Receipt this Period

35.00

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

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

570.00

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

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Robert B Jacko

Mailing Address 2530 Shagbark Ln.

City State Zip Code
West Lafayette IN 47906

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Info Requested

Info Requested

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 19 / 2012

Transaction ID : SA11AI.16890

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Jobar Realty

Mailing Address PO Box 2709

City State Zip Code
South Bend IN 46680

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3240.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2012

Transaction ID : SA11AI.17687

Amount of Each Receipt this Period

810.00

In-kind - October Rent

Full Name (Last, First, Middle Initial)

C. Kevin J. Kelly

Mailing Address 51320 Pebble Beach Court

City State Zip Code
Granger IN 46530

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Walsh & Kelly Inc.

Executive

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 24 / 2012

Transaction ID : SA11AI.16967

Amount of Each Receipt this Period

2500.00

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

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

3360.00

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Cynthia Kirchhofer

Mailing Address 610 Redfern Dr.

City State Zip Code
Beech Grove IN 46107

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

State of Indiana

State Representative

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 31 / 2012

Transaction ID : SA11AI.17094

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

B. David Kovacich

Mailing Address 5251 Cheyenne Moon

City State Zip Code
Carmel IN 46033

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

IHP

Physician

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 23 / 2012

Transaction ID : SA11AI.16908

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Marjorie Kroeger

Mailing Address 5211 N Meridian Street

City State Zip Code
Indianapolis IN 46208

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 31 / 2012

Transaction ID : SA11AI.17095

Amount of Each Receipt this Period

75.00

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

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

525.00

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

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Deborah Lines

Mailing Address 2334 E 75th Street

City State Zip Code
 Indianapolis IN 46240

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Info Requested

Info Requested

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 24 / 2012

Transaction ID : SA11AI.16974

Amount of Each Receipt this Period

20.12

Full Name (Last, First, Middle Initial)

B. Deborah Lines

Mailing Address 2334 E 75th Street

City State Zip Code
 Indianapolis IN 46240

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Info Requested

Info Requested

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.32

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 24 / 2012

Transaction ID : SA11AI.17233

Amount of Each Receipt this Period

20.12

Full Name (Last, First, Middle Initial)

C. Wayne A. Luchenbill

Mailing Address 31 Ems T19

City State Zip Code
 Leesburg IN 46538

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Info Requested

Info Requested

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 24 / 2012

Transaction ID : SA11AI.16945

Amount of Each Receipt this Period

220.00

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

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

260.24

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

Use separate schedule(s)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. P.E. MacAllister

Mailing Address P.O. Box 1941

City	State	Zip Code
Indianapolis	IN	46206

FEC ID number of contributing federal political committee.

C

Name of Employer

MacAllister Machinery Co.

Occupation

Executive

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2012

Transaction ID : SA11Al.17170

Amount of Each Receipt this Period

4500.00

Full Name (Last, First, Middle Initial)

B. James M. Maddox

Mailing Address 8895 East 200 South

City	State	Zip Code
Zionsville	IN	46077

FEC ID number of contributing federal political committee.

C

Name of Employer

Maddox Industrial Contractors

Occupation

Executive

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2012

Transaction ID : SA11Al.16919

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. George F. Marsh

Mailing Address 16141 Wellington Parkway

City	State	Zip Code
Granger	IN	46530

FEC ID number of contributing federal political committee.

C

Name of Employer

FDC Graphic Films

Occupation

Sales & Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	05	/	2012

Transaction ID : SA11Al.17459

Amount of Each Receipt this Period

100.00

Best Efforts Memo

[MEMO ITEM]

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

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

4600.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.17170

This receipt is the federal portion of a single check contribution and the non-federal portion of \$500 was transfered to our non-federal account on 11/2/12 per AO 2001-17.

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Dean Mayfield

Mailing Address 1825 Red Fox Ct. W

City State Zip Code
Martinsville IN 46151

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mayfield Insurance

Occupation

Executive

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

10 / 18 / 2012

Transaction ID : SA11AI.16822

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

B. Darby Anne 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

Smithville

Occupation

Executive

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 19 / 2012

Transaction ID : SA11AI.16842

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Jim Meece

Mailing Address 3901 North US 41

City State Zip Code
Bloomington IN 47832

FEC ID number of contributing
federal political committee.

C

Name of Employer

Turkey Run School Corporation

Occupation

Teacher

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.20

Date of Receipt

10 / 25 / 2012

Transaction ID : SA11AI.17024

Amount of Each Receipt this Period

20.12

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

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

670.12

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Marian Godeke Miller

Mailing Address 58 Thise Court

City
Lafayette

State
IN

Zip Code
47905

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 24 / 2012

Transaction ID : SA11AI.16986

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. Gene Mory Jr.

Mailing Address P.O. Box 37

City

South Milford

State

IN

Zip Code

46786

FEC ID number of contributing
federal political committee.

C

Name of Employer

Info Requested

Occupation

Info Requested

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 19 / 2012

Transaction ID : SA11AI.16873

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Fredric Ninde

Mailing Address 3959 E 400 N

City

Portland

State

IN

Zip Code

47371

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 19 / 2012

Transaction ID : SA11AI.16835

Amount of Each Receipt this Period

55.00

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

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

355.00

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

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

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Florence A. Prybysz

Mailing Address 50 North 500 West

City

Valparaiso

State

IN

Zip Code

46383

FEC ID number of contributing
federal political committee.

C

Name of Employer

Info Requested

Occupation

Info Requested

Receipt For: 2010

☐ Primary
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 24 / 2012

Transaction ID : SA11AI.16946

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Curtis A. Rector

Mailing Address 11911 Promontory Ct.

City

Indianapolis

State

IN

Zip Code

46236

FEC ID number of contributing
federal political committee.

C

Name of Employer

Arbor Homes

Occupation

Executive

Receipt For: 2010

☐ Primary
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 19 / 2012

Transaction ID : SA11AI.16893

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Lynn C Reecer

Mailing Address 3027 Covington Lake Dr.

City

Fort Wayne

State

IN

Zip Code

46804

FEC ID number of contributing
federal political committee.

C

Name of Employer

Reecer Properties

Occupation

Executive

Receipt For: 2010

☐ Primary
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 16 / 2012

Transaction ID : SA11AI.17217

Amount of Each Receipt this Period

40.00

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

1090.00

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

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

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Roger A. Reeves

Mailing Address 123032 Kingfisher Ct.

City

Indianapolis

State

IN

Zip Code

46236

FEC ID number of contributing
federal political committee.

C

Name of Employer

Interactive Intelligence

Occupation

Sales

Receipt For: 2010

☐ Primary
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

201.20

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 24 / 2012

Transaction ID : SA11AI.16965

Amount of Each Receipt this Period

20.12

Full Name (Last, First, Middle Initial)

B. James W. Richardson

Mailing Address 1000 Oakhurst Dr.

City

West Lafayette

State

IN

Zip Code

47906

FEC ID number of contributing
federal political committee.

C

Name of Employer

Info Requested

Occupation

Info Requested

Receipt For: 2010

☐ Primary
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 24 / 2012

Transaction ID : SA11AI.16979

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. William J. Rodda

Mailing Address 518 Sagebrush Drive

City

Kokomo

State

IN

Zip Code

46901

FEC ID number of contributing
federal political committee.

C

Name of Employer

Info Requested

Occupation

Info Requested

Receipt For: 2010

☐ Primary
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 24 / 2012

Transaction ID : SA11AI.17009

Amount of Each Receipt this Period

50.00

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

170.12

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

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

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Hans Von Schlemmer

Mailing Address 5868 E 71st St #138

City
Indianapolis

State Zip Code
IN 46220

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Homes Inc.

Occupation

Executive

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2012

Transaction ID : SA11AI.17147

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Wayne S. Schmidt

Mailing Address 320 E. Vermont Street

City
Indianapolis

State Zip Code
IN 46204

FEC ID number of contributing
federal political committee.

C

Name of Employer

Schmidt Associates

Occupation

Executive

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 19 / 2012

Transaction ID : SA11AI.16828

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

C. J.R. Showers III

Mailing Address 3085 South 250 East

City
Shelbyville

State Zip Code
IN 46176

FEC ID number of contributing
federal political committee.

C

Name of Employer

Info Requested

Occupation

Info Requested

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2012

Transaction ID : SA11AI.17089

Amount of Each Receipt this Period

300.00

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

5400.00

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

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Jefferson Scott Shreve

Mailing Address 725 E. Markwood Ave

City

Indianapolis

State

IN

Zip Code

46227

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Real Estate

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3750.00

Date of Receipt

10 / 29 / 2012

Transaction ID : SA11AI.17065

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. William Silver

Mailing Address 810 N Adams Ave.

City

Fowler

State

IN

Zip Code

47944

FEC ID number of contributing
federal political committee.

C

Name of Employer

Info Requested

Occupation

Info Requested

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

10 / 19 / 2012

Transaction ID : SA11AI.16849

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

c. Gerlinde Spartz

Mailing Address 19865 Creek Rd

City

Noblesville

State

IN

Zip Code

46060

FEC ID number of contributing
federal political committee.

C

Name of Employer

Info Requested

Occupation

Info Requested

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

10 / 26 / 2012

Transaction ID : SA11AI.17058

Amount of Each Receipt this Period

400.00

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

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

635.00

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

Use separate schedule(s)
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(check only one)

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

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Gerlinde Spartz

Mailing Address 19865 Creek Rd

City	State	Zip Code
Noblesville	IN	46060

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Info Requested

Info Requested

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2012

Transaction ID : SA11AI.17064

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. Toland Jay Stelter

Mailing Address 42 South Scatterfield Road

City	State	Zip Code
Anderson	IN	46012

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2012

Transaction ID : SA11AI.16886

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Amy J Stoll

Mailing Address 1747 E 1275 S

City	State	Zip Code
Kokomo	IN	46901

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Jobar Realty

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.17692

Amount of Each Receipt this Period

405.00

In-kind - October Rent (Jobar Realty Partner)

[MEMO ITEM]

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

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

225.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Paul Matthew Strittmatter

Mailing Address 2030 SW F St.

City State Zip Code
 Richmond IN 47374

FEC ID number of contributing
federal political committee.

C

Name of Employer

Indiana State Excise Police

Occupation

Superintendent

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 24 / 2012

Transaction ID : SA11AI.16953

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. Merrill S. Thompson

Mailing Address 4688 S. Mill Rd.

City State Zip Code
 Carbon IN 47837

FEC ID number of contributing
federal political committee.

C

Name of Employer

Info Requested

Occupation

Info Requested

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 24 / 2012

Transaction ID : SA11AI.16932

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Jack Trickler

Mailing Address 305 Fieldstone Drive

City State Zip Code
 La Porte IN 46350

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 24 / 2012

Transaction ID : SA11AI.17012

Amount of Each Receipt this Period

100.00

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

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

400.00

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

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Martin Walker

Mailing Address 295 Village Lane, #73

City State Zip Code
 Greenwood IN 46143

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

10 / 24 / 2012

Transaction ID : SA11AI.16942

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Barbara E. White

Mailing Address 1111 Whitehall Dr

City State Zip Code
 Crown Point IN 46307

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

10 / 24 / 2012

Transaction ID : SA11AI.16941

Amount of Each Receipt this Period

10000.00

Full Name (Last, First, Middle Initial)

C. Howard Williams

Mailing Address 61650 Ironwood Rd.

City State Zip Code
 South Bend IN 46614

FEC ID number of contributing
federal political committee.

C

Name of Employer

Law Office of Howard Williams

Occupation

Attorney

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

11 / 07 / 2012

Transaction ID : SA11AI.17193

Amount of Each Receipt this Period

5000.00

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

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

15100.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @G H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.16941

This receipt is the federal portion of a single check contribution and the non-federal portion of \$20,000 was transferred to our non-federal account on 10/24/12 per AO 2001-17.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Shirley Wise

Mailing Address 3844 W CR 150 N

City

Connersville

State

IN

Zip Code

47331

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Agriculture

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.08

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 24 / 2012

Transaction ID : SA11Al.16961

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

B. Shirley Wise

Mailing Address 3844 W CR 150 N

City

Connersville

State

IN

Zip Code

47331

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Agriculture

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2012

Transaction ID : SA11Al.17186

Amount of Each Receipt this Period

20.12

Full Name (Last, First, Middle Initial)

C. Donald F. Woodley

Mailing Address 8846 Worthington Cr.

City

Indianapolis

State

IN

Zip Code

46278

FEC ID number of contributing
federal political committee.

C

Name of Employer

Woodley Farra Manion Managemen

Occupation

Executive

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 19 / 2012

Transaction ID : SA11Al.16826

Amount of Each Receipt this Period

2500.00

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

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

2525.12

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.16826

This receipt is the federal portion of a single check contribution and the non-federal portion of \$2,500 was transferred to our non-federal account on 10/19/12 per AO 2001-17.

Form/Schedule:

Transaction ID:

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

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. David J. Wulf

Mailing Address 701 Wabash Avenue,
Suite 501City State Zip Code
Terre Haute IN 47807FEC ID number of contributing
federal political committee.

C

Name of Employer

Templeton Coal Company, Inc.

Occupation

Executive

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 11 / 2012

Transaction ID : SA11AI.17214

Amount of Each Receipt this Period

20.12

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

20.12

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

45461.20

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

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Committee to Elect Steve Davisson

Mailing Address PO Box 341

City State Zip Code
 Salem IN 47167

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

11 / 16 / 2012

Transaction ID : SA11C.17471

Amount of Each Receipt this Period

1000.00

Federally Permissible Funds

Full Name (Last, First, Middle Initial)

B. Friends of Don Lehe

Mailing Address 10644 S 100 E

City State Zip Code
 Brookston IN 47923

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

11 / 16 / 2012

Transaction ID : SA11C.17473

Amount of Each Receipt this Period

1000.00

Federally Permissible Funds

Full Name (Last, First, Middle Initial)

C. FRIENDS OF SUSAN BROOKS

Mailing Address 9333 N MERIDIAN STREET
 SUITE 230

City State Zip Code
 INDIANAPOLIS IN 46260

FEC ID number of contributing
federal political committee.

C C00500207

Name of Employer

Occupation

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9275.00

Date of Receipt

10 / 19 / 2012

Transaction ID : SA11C.16858

Amount of Each Receipt this Period

8000.00

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

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

10000.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Kathy Kreag Richardson for State Rep

Mailing Address 1363 Grant St.

City State Zip Code
 Noblesville IN 46060

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 31 2012

Transaction ID : SA11C.17475

Amount of Each Receipt this Period

1000.00

Federally Permissible Funds

Full Name (Last, First, Middle Initial)

B. LUKE MESSER FOR CONGRESS

Mailing Address P.O. BOX 917

City State Zip Code
 SHELBYVILLE IN 46176

FEC ID number of contributing
federal political committee.

C C00460667

Name of Employer

Occupation

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 31 2012

Transaction ID : SA11C.17101

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

C. LUKE MESSER FOR CONGRESS

Mailing Address P.O. BOX 917

City State Zip Code
 SHELBYVILLE IN 46176

FEC ID number of contributing
federal political committee.

C C00460667

Name of Employer

Occupation

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

24397.17

Date of Receipt

M M / D D / Y Y Y Y Y
 11 05 2012

Transaction ID : SA11C.17187

Amount of Each Receipt this Period

19397.17

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

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

25397.17

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

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. RAYTHEON COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1100 WILSON BLVD
SUITE 1500

City State Zip Code
ARLINGTON VA 22209

FEC ID number of contributing
federal political committee.

C C00097568

Name of Employer

Occupation

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

11 / **02** / **2012**

Transaction ID : SA11C.17162

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Sharon Negele for State Representative

Mailing Address 305 E Main St.

City State Zip Code
Attica IN 47918

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

10 / **31** / **2012**

Transaction ID : SA11C.17477

Amount of Each Receipt this Period

1000.00

Federally Permissible Funds

Full Name (Last, First, Middle Initial)

C. THE GEO GROUP, INC. POLITICAL ACTION COMMITTEE

Mailing Address ONE PARK PLACE, SUITE 700
621 NORTHWEST 53RD STREET

City State Zip Code
BOCA RATON FL 33487

FEC ID number of contributing
federal political committee.

C C00382150

Name of Employer

Occupation

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

10 / **31** / **2012**

Transaction ID : SA11C.17091

Amount of Each Receipt this Period

2500.00

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

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

8500.00

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

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

FOR LINE NUMBER: PAGE 37 OF 182

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Torr for State Representative

Mailing Address 11944 Esty Way

City State Zip Code
Carmel IN 46033

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 31 2012

Transaction ID : SA11C.17479

Amount of Each Receipt this Period

1000.00

Federally Permissible Funds

Full Name (Last, First, Middle Initial)

B. UNITED PARCEL SERVICE INC. PAC

Mailing Address 55 GLENLAKE PARKWAY NE

City State Zip Code
ATLANTA GA 30328

FEC ID number of contributing
federal political committee.

C C00064766

Name of Employer

Occupation

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 24 2012

Transaction ID : SA11C.16983

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

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

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

6000.00

49897.17

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

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

FOR LINE NUMBER: PAGE 38 OF 182

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. ARKANSAS FOR LEADERSHIP POLITICAL ACTION COMMITTEE (ARKPAC)

Mailing Address PO BOX 1672

City State Zip Code
 ALEXANDRIA VA 22313

FEC ID number of contributing
federal political committee.

C C00413948

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

10 / 24 / 2012

Transaction ID : SA12.17458

Amount of Each Receipt this Period

2272.73

Joint Fundraising Transfer - Target State Victory Fund

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. COMMON VALUES PAC

Mailing Address 901 N WASHINGTON ST
 SUITE 700

City State Zip Code
 ALEXANDRIA VA 22314

FEC ID number of contributing
federal political committee.

C C00442368

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

10 / 24 / 2012

Transaction ID : SA12.17450

Amount of Each Receipt this Period

4545.45

Joint Fundraising Transfer - Target State Victory Fund

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. FLUOR CORPORATION POLITICAL ACTION COMMITTEE (FLUOR PAC)

Mailing Address 6700 LAS COLINAS BOULEVARD

City State Zip Code
 IRVING TX 75039

FEC ID number of contributing
federal political committee.

C C00034132

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

10 / 24 / 2012

Transaction ID : SA12.17452

Amount of Each Receipt this Period

5000.00

Joint Fundraising Transfer - Target State Victory Fund

[MEMO ITEM]

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

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. KELLY PAC

Mailing Address 901 N WASHINGTON STREET
SUITE 700

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing
federal political committee.

C C00493411

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

10 / 24 / 2012

Transaction ID : SA12.17456

Amount of Each Receipt this Period

2272.73

Joint Fundraising Transfer - Target State Victory Fund

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Harvey M. Meyerhoff

Mailing Address 1 South Street
Suite 1000

City State Zip Code
Baltimore MD 21202

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

10 / 24 / 2012

Transaction ID : SA12.17454

Amount of Each Receipt this Period

3250.00

Joint Fundraising Transfer - Target State Victory Fund

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. PRESERVING AMERICA'S TRADITIONS (PATPAC)

Mailing Address 610 S. BOULEVARD

City State Zip Code
TAMPA FL 33606

FEC ID number of contributing
federal political committee.

C C00383869

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

10 / 24 / 2012

Transaction ID : SA12.17448

Amount of Each Receipt this Period

5000.00

Joint Fundraising Transfer - Target State Victory Fund

[MEMO ITEM]

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

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. REPUBLICAN NATIONAL COMMITTEE

Mailing Address 310 FIRST STREET SE

City	State	Zip Code
WASHINGTON	DC	20003

FEC ID number of contributing federal political committee.

C C00003418

Name of Employer

Occupation

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221684.65

Date of Receipt

11 / **01** / **2012**

Transaction ID : SA12.17151

Amount of Each Receipt this Period

4000.00

Full Name (Last, First, Middle Initial)

B. TARGET STATE VICTORY FUND

Mailing Address 1609 SHOAL CREEK BLVD STE 203

City	State	Zip Code
AUSTIN	TX	78711

FEC ID number of contributing federal political committee.

C C00521708

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

89974.01

Date of Receipt

10 / **24** / **2012**

Transaction ID : SA12.17446

Amount of Each Receipt this Period

22340.91

Full Name (Last, First, Middle Initial)

C.

Mailing Address

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

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

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

26340.91

26340.91

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Chase Card Services

Mailing Address P.O. Box 94014

City Palatine	State IL	Zip Code 60094
------------------	-------------	-------------------

Purpose of Disbursement
Credit Card: See Below

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2012

Transaction ID : SB21B.17314

Amount of Each Disbursement this Period

26.55

Full Name (Last, First, Middle Initial)

B. CODA Computer Services Inc.

Mailing Address 212 W 10th Street, Suite B470

City Indianapolis	State IN	Zip Code 46202
----------------------	-------------	-------------------

Purpose of Disbursement
Website Hosting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2012

Transaction ID : SB21B.17327

Amount of Each Disbursement this Period

425.00

Full Name (Last, First, Middle Initial)

C. Exact Target

Mailing Address 20 N. Meridian St., Ste. 200

City Indianapolis	State IN	Zip Code 46204
----------------------	-------------	-------------------

Purpose of Disbursement
Monthly Email Expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2012

Transaction ID : SB21B.17353

Amount of Each Disbursement this Period

3105.18

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

3556.73

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Exact Target

Mailing Address 20 N. Meridian St., Ste. 200

City Indianapolis State IN Zip Code 46204

Purpose of Disbursement
Monthly Email Expense

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 20 / 2012
Transaction ID : SB21B.17300

Amount of Each Disbursement this Period

2607.91

Full Name (Last, First, Middle Initial)

B. Galvin Technologies Indianapolis, LLC

Mailing Address 4622 W 72nd Street Suite #2D

City Indianapolis State IN Zip Code 46268

Purpose of Disbursement
Website Development

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 19 / 2012
Transaction ID : SB21B.17356

Amount of Each Disbursement this Period

93.75

Full Name (Last, First, Middle Initial)

C. GoDaddy.comMailing Address 14455 N Hayden Rd
Suite 226

City Scottsdale State AZ Zip Code 85260

Purpose of Disbursement
State Party Website Domain

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2012
Transaction ID : SB21B.17709

Amount of Each Disbursement this Period

26.55

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2701.66

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

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

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Jobar Realty

Mailing Address PO Box 2709

City State Zip Code
 South Bend IN 46680

Purpose of Disbursement
 In-kind - October Rent

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
 10 31 2012

Transaction ID : SB21B.17688

Amount of Each Disbursement this Period

810.00

Full Name (Last, First, Middle Initial)

B. TLS.net

Mailing Address 733 W Henry St.

City State Zip Code
 Indianapolis IN 46225

Purpose of Disbursement
 Email Spam Filter

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
 10 26 2012

Transaction ID : SB21B.17290

Amount of Each Disbursement this Period

24.00

Full Name (Last, First, Middle Initial)

C. TLS.net

Mailing Address 733 W Henry St.

City State Zip Code
 Indianapolis IN 46225

Purpose of Disbursement
 Email Spam Filter

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
 11 20 2012

Transaction ID : SB21B.17299

Amount of Each Disbursement this Period

24.00

SUBTOTAL of Disbursements This Page (optional)..... ►

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

858.00

7116.39

	21b		22	<input checked="" type="checkbox"/>	23		24		25		26
	27		28a		28b		28c		29		30b

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. HOOSIERS FOR RICHARD MOURDOCK INC

Date of Disbursement

Transaction ID : SB23.17302

Category/
Type

Disbursement For: 2012

☒ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

5000.00

Date of Disbursement

Amount of Each Disbursement this Period

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Amount of Each Disbursement this Period

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

5000.00

5000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 45 OF 182

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. 121 E Maryland, LLC

Mailing Address 121 E. Maryland St.

City	State	Zip Code
Indianapolis	IN	46204

Purpose of Disbursement
FEA: Parking Expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2012

Transaction ID : SB30B.17330

Amount of Each Disbursement this Period

380.00

Full Name (Last, First, Middle Initial)

B. AccuPay

Mailing Address 584 N Emerson Ave.

City	State	Zip Code
Greenwood	IN	46143

Purpose of Disbursement
FEA: Payroll Taxes

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2012

Transaction ID : SB30B.17340

Amount of Each Disbursement this Period

9357.55

Full Name (Last, First, Middle Initial)

C. AccuPay

Mailing Address 584 N Emerson Ave.

City	State	Zip Code
Greenwood	IN	46143

Purpose of Disbursement
FEA: Payroll Processing

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2012

Transaction ID : SB30B.17344

Amount of Each Disbursement this Period

57.02

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

9794.57

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. AccuPay

Mailing Address 584 N Emerson Ave.

City	State	Zip Code
Greenwood	IN	46143

Purpose of Disbursement
FEA: Payroll Taxes

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2012

Transaction ID : SB30B.17343

Amount of Each Disbursement this Period

8301.47

Full Name (Last, First, Middle Initial)

B. AccuPay

Mailing Address 584 N Emerson Ave.

City	State	Zip Code
Greenwood	IN	46143

Purpose of Disbursement
FEA: Payroll Processing

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2012

Transaction ID : SB30B.17348

Amount of Each Disbursement this Period

54.34

Full Name (Last, First, Middle Initial)

C. AccuPay

Mailing Address 584 N Emerson Ave.

City	State	Zip Code
Greenwood	IN	46143

Purpose of Disbursement
FEA: Payroll Processing

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2012

Transaction ID : SB30B.17303

Amount of Each Disbursement this Period

54.91

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

8410.72

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. AccuPay

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2012

Mailing Address 584 N Emerson Ave.

City	State	Zip Code
Greenwood	IN	46143

Transaction ID : SB30B.17309Purpose of Disbursement
FEA: Payroll Taxes

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

8569.77

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Airnet

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		09		2012

Mailing Address PO Box 11181

City	State	Zip Code
Chattanooga	TN	37401

Transaction ID : SB30B.17359Purpose of Disbursement
FEA: State Party Voter ID Phone Bank Minutes

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

13643.96

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Airnet

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		20		2012

Mailing Address PO Box 11181

City	State	Zip Code
Chattanooga	TN	37401

Transaction ID : SB30B.17298Purpose of Disbursement
FEA: State Party Voter ID Phone Bank Minutes

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

7540.86

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

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

29754.59

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Abigail Anders

Mailing Address 10654 Springston Ct

City	State	Zip Code
Fishers	IN	46037

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2012

Transaction ID : SB30B.17285

Amount of Each Disbursement this Period

516.31

Full Name (Last, First, Middle Initial)

B. Abigail Anders

Mailing Address 10654 Springston Ct

City	State	Zip Code
Fishers	IN	46037

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2012

Transaction ID : SB30B.17288

Amount of Each Disbursement this Period

516.30

Full Name (Last, First, Middle Initial)

C. Abigail Anders

Mailing Address 10654 Springston Ct

City	State	Zip Code
Fishers	IN	46037

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2012

Transaction ID : SB30B.17248

Amount of Each Disbursement this Period

516.31

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

1548.92

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Abigail Anders

Mailing Address 10654 Springston Ct

City	State	Zip Code
Fishers	IN	46037

Purpose of Disbursement
FEA: Volunteer Meals Reimbursement

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2012

Transaction ID : SB30B.17574

Amount of Each Disbursement this Period

44.67

Full Name (Last, First, Middle Initial)

B. Anthem Blue Cross Blue Shield of Indiana

Mailing Address 220 Virginia Avenue

City	State	Zip Code
Indianapolis	IN	46204

Purpose of Disbursement
FEA: Health Insurance

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	2010
	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2012

Transaction ID : SB30B.17322

Amount of Each Disbursement this Period

1975.67

Full Name (Last, First, Middle Initial)

C. Anthem Life Insurance Company

Mailing Address Department L-880

City	State	Zip Code
Columbus	IN	43260

Purpose of Disbursement
FEA: Life Insurance

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	2010
	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2012

Transaction ID : SB30B.17326

Amount of Each Disbursement this Period

64.00

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

2084.34

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. AT&T Wireless

Mailing Address P.O. Box 30024

City	State	Zip Code
College Station	TX	77842

Purpose of Disbursement
FEA: Cell Phone Expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		09		2012

Transaction ID : SB30B.17342

Amount of Each Disbursement this Period

268.54

Full Name (Last, First, Middle Initial)

B. Jessie L. Beyrer

Mailing Address 219 Saint Charles Way

City	State	Zip Code
Whiteland	IN	46184

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2012

Transaction ID : SB30B.17283

Amount of Each Disbursement this Period

940.32

Full Name (Last, First, Middle Initial)

C. Jessie L. Beyrer

Mailing Address 219 Saint Charles Way

City	State	Zip Code
Whiteland	IN	46184

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2012

Transaction ID : SB30B.17281

Amount of Each Disbursement this Period

1050.60

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

2259.46

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Jessie L. Beyrer

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2012

Mailing Address 219 Saint Charles Way

City	State	Zip Code
Whiteland	IN	46184

Transaction ID : SB30B.17245Purpose of Disbursement
FEA: Payroll

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

940.33

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Bruno's Pizza

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2012

Mailing Address 28046 County Road 16 W

City	State	Zip Code
Elkhart	IN	46514

Transaction ID : SB30B.17580Purpose of Disbursement
FEA: Pizza for Volunteers - Paid by B. Parsons

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

74.65

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Capital Bank & Trust

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2012

Mailing Address PO Box 6164

City	State	Zip Code
Indianapolis	IN	46206

Transaction ID : SB30B.17352Purpose of Disbursement
FEA: IRA Contributions

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

138.46

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

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

1078.79

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Capital Bank & Trust

Mailing Address PO Box 6164

City	State	Zip Code
Indianapolis	IN	46206

Purpose of Disbursement
FEA: IRA Contributions

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2012

Transaction ID : SB30B.17324

Amount of Each Disbursement this Period

138.46

Full Name (Last, First, Middle Initial)

B. Capital Bank & Trust

Mailing Address PO Box 6164

City	State	Zip Code
Indianapolis	IN	46206

Purpose of Disbursement
FEA: IRA Contributions

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2012

Transaction ID : SB30B.17308

Amount of Each Disbursement this Period

138.46

Full Name (Last, First, Middle Initial)

C. Come Back Inn

Mailing Address 415 Spring St.

City	State	Zip Code
Jeffersonville	IN	47138

Purpose of Disbursement
FEA: Pizza for Volunteers - Paid by M. Humm

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2012

Transaction ID : SB30B.17498

Amount of Each Disbursement this Period

36.97

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

276.92

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<input type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input checked="" type="checkbox"/>	30b

INDIANA REPUBLICAN STATE COMMITTEE, INC.

[MEMO ITEM]

35806.09

34821.99

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB30B
Transaction ID : SB30B.17335

This disbursement is for non-allocable campaign mail that was sent to voters. This disbursement is considered a public communication but is exempt activity and therefore not a contribution to any federal candidate because volunteers sorted and addressed the mail.

Form/Schedule: SB30B
Transaction ID: SB30B.17292

This disbursement is for non-allocable campaign mail that was sent to voters. This disbursement is considered a public communication but is exempt activity and therefore not a contribution to any federal candidate because volunteers sorted and addressed the mail.

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Domino's Pizza

Mailing Address 845 N Capitol Ave

City	State	Zip Code
Indianapolis	IN	46204

Purpose of Disbursement
FEA: Pizza for Volunteers - Paid by J. Knepper

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2012

Transaction ID : SB30B.17503

Amount of Each Disbursement this Period

31.01

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Domino's Pizza

Mailing Address 845 N Capitol Ave

City	State	Zip Code
Indianapolis	IN	46204

Purpose of Disbursement
FEA: Pizza for Volunteers - Paid by J. Knepper

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2012

Transaction ID : SB30B.17537

Amount of Each Disbursement this Period

45.18

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Domino's Pizza

Mailing Address 845 N Capitol Ave

City	State	Zip Code
Indianapolis	IN	46204

Purpose of Disbursement
FEA: Pizza for Volunteers - Paid by J. Knepper

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2012

Transaction ID : SB30B.17565

Amount of Each Disbursement this Period

164.43

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Dot the I Design & Graphics

Mailing Address 2814 Glendale Road

City	State	Zip Code
Charlotte	NC	28209

 Purpose of Disbursement
 FEA: State Party Direct Mail Design - September Mailing

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		09		2012

Transaction ID : SB30B.17618

Amount of Each Disbursement this Period

360.00

Full Name (Last, First, Middle Initial)

B. Dot the I Design & Graphics

Mailing Address 2814 Glendale Road

City	State	Zip Code
Charlotte	NC	28209

 Purpose of Disbursement
 FEA: State Party Direct Mail Design - September Housefile

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		09		2012

Transaction ID : SB30B.17621

Amount of Each Disbursement this Period

120.00

Full Name (Last, First, Middle Initial)

C. Fineline Printing Group

Mailing Address 8081 Zionsville Rd.

City	State	Zip Code
Indianapolis	IN	46268

 Purpose of Disbursement
 FEA: Non-Allocable Mail Postage

Candidate Name

RICHARD E MOURDOCK
 Office Sought: ☐ House
☒ Senate
☐ President

 Disbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: IN District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2012

Transaction ID : SB30B.17336

Amount of Each Disbursement this Period

39977.57

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

39977.57

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: 97 `A-G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A-N5HCB
.

Form/Schedule: SB30B
Transaction ID : SB30B.17336

This disbursement is postage for non-allocable campaign mail that was sent to voters. This disbursement is considered a public communication but is exempt activity and therefore not a contribution to any federal candidate because volunteers sorted and addressed the mail.

Form/Schedule:
Transaction ID:

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Fineline Printing Group

Mailing Address 8081 Zionsville Rd.

City	State	Zip Code
Indianapolis	IN	46268

Purpose of Disbursement
FEA: Non-Allocable Mail Postage

Candidate Name

RICHARD E MOURDOCKOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: IN District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2012

Transaction ID : SB30B.17317

Amount of Each Disbursement this Period

38545.93

Full Name (Last, First, Middle Initial)

B. Fineline Printing Group

Mailing Address 8081 Zionsville Rd.

City	State	Zip Code
Indianapolis	IN	46268

Purpose of Disbursement
FEA: Non-Allocable Mail Postage

Candidate Name

RICHARD E MOURDOCKOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: IN District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2012

Transaction ID : SB30B.17297

Amount of Each Disbursement this Period

37780.35

Full Name (Last, First, Middle Initial)

C. Fineline Printing Group

Mailing Address 8081 Zionsville Rd.

City	State	Zip Code
Indianapolis	IN	46268

Purpose of Disbursement
FEA: Non-Allocable Mail Postage

Candidate Name

RICHARD E MOURDOCKOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: IN District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2012

Transaction ID : SB30B.17328

Amount of Each Disbursement this Period

37606.85

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

113933.13

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: 97 `A-G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB
.

Form/Schedule: SB30B
Transaction ID : SB30B.17317

This disbursement is postage for non-allocable campaign mail that was sent to voters. This disbursement is considered a public communication but is exempt activity and therefore not a contribution to any federal candidate because volunteers sorted and addressed the mail.

Form/Schedule: SB30B
Transaction ID: SB30B.17297

This disbursement is postage for non-allocable campaign mail that was sent to voters. This disbursement is considered a public communication but is exempt activity and therefore not a contribution to any federal candidate because volunteers sorted and addressed the mail.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB30B
Transaction ID : SB30B.17328

This disbursement is postage for non-allocable campaign mail that was sent to voters. This disbursement is considered a public communication but is exempt activity and therefore not a contribution to any federal candidate because volunteers sorted and addressed the mail.

Form/Schedule:
Transaction ID:

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Justin D. Garrett

Mailing Address 1015 Hervey Street

City	State	Zip Code
Indianapolis	IN	46203

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2012

Transaction ID : SB30B.17278

Amount of Each Disbursement this Period

1824.59

Full Name (Last, First, Middle Initial)

B. Justin D. Garrett

Mailing Address 1015 Hervey Street

City	State	Zip Code
Indianapolis	IN	46203

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2012

Transaction ID : SB30B.17284

Amount of Each Disbursement this Period

1791.40

Full Name (Last, First, Middle Initial)

C. Justin D. Garrett

Mailing Address 1015 Hervey Street

City	State	Zip Code
Indianapolis	IN	46203

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2012

Transaction ID : SB30B.17249

Amount of Each Disbursement this Period

1813.52

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

5429.51

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Natalie Gibbons

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2012

Mailing Address 2447 Crescent Hill Dr NE

City	State	Zip Code
Corydon	IN	47112

Transaction ID : SB30B.17279Purpose of Disbursement
FEA: Payroll

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1007.98

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Natalie Gibbons

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2012

Mailing Address 2447 Crescent Hill Dr NE

City	State	Zip Code
Corydon	IN	47112

Transaction ID : SB30B.17282Purpose of Disbursement
FEA: Payroll

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

881.43

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Natalie Gibbons

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2012

Mailing Address 2447 Crescent Hill Dr NE

City	State	Zip Code
Corydon	IN	47112

Transaction ID : SB30B.17311Purpose of Disbursement
FEA: Payroll

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

995.58

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

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

2884.99

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Gridiron Communications LLC

Mailing Address 50710 Princess Way Suite 100

City	State	Zip Code
Granger	IN	46530

Purpose of Disbursement
FEA: Non-Allocable Mail

Candidate Name

JACKIE (SWIHART) WALORSKIOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: IN District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2012

Transaction ID : SB30B.17333

Amount of Each Disbursement this Period

13265.35

Full Name (Last, First, Middle Initial)

B. Gridiron Communications LLC

Mailing Address 50710 Princess Way Suite 100

City	State	Zip Code
Granger	IN	46530

Purpose of Disbursement
FEA: Non-Allocable Mail

Candidate Name

LARRY D BUCSHONOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: IN District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2012

Transaction ID : SB30B.17334

Amount of Each Disbursement this Period

17637.50

Full Name (Last, First, Middle Initial)

C. Gridiron Communications LLC

Mailing Address 50710 Princess Way Suite 100

City	State	Zip Code
Granger	IN	46530

Purpose of Disbursement
FEA: State Party Absentee Ballot Chase Mail

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2012

Transaction ID : SB30B.17337

Amount of Each Disbursement this Period

1135.83

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

32038.68

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: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB30B
Transaction ID : SB30B.17333

This disbursement is for non-allocable campaign mail that was sent to voters. This disbursement is considered a public communication but is exempt activity and therefore not a contribution to any federal candidate because volunteers sorted and addressed the mail.

Form/Schedule: SB30B
Transaction ID: SB30B.17334

This disbursement is for non-allocable campaign mail that was sent to voters. This disbursement is considered a public communication but is exempt activity and therefore not a contribution to any federal candidate because volunteers sorted and addressed the mail.

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Gridiron Communications LLC

Mailing Address 50710 Princess Way Suite 100

City	State	Zip Code
Granger	IN	46530

Purpose of Disbursement
FEA: State Party Absentee Ballot Chase Mail

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2012

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2012

Transaction ID : SB30B.17315

Amount of Each Disbursement this Period

654.21

Full Name (Last, First, Middle Initial)

B. Gridiron Communications LLC

Mailing Address 50710 Princess Way Suite 100

City	State	Zip Code
Granger	IN	46530

Purpose of Disbursement
FEA: State Party Absentee Ballot Chase Mail

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2012

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2012

Transaction ID : SB30B.17329

Amount of Each Disbursement this Period

240.12

Full Name (Last, First, Middle Initial)

C. Guardian Insurance

Mailing Address P.O. Box 2459

City	State	Zip Code
Spokane	WA	99210

Purpose of Disbursement
FEA: Dental & Vision Insurance

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2010

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2012

Transaction ID : SB30B.17319

Amount of Each Disbursement this Period

332.76

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

1227.09

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Trent Hagerty

Mailing Address 1923 Jasmine Dr

City	State	Zip Code
Indianapolis	IN	46219

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2012

Transaction ID : SB30B.17287

Amount of Each Disbursement this Period

1193.99

Full Name (Last, First, Middle Initial)

B. Trent Hagerty

Mailing Address 1923 Jasmine Dr

City	State	Zip Code
Indianapolis	IN	46219

Purpose of Disbursement
FEA: Volunteer Meals Reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2012

Transaction ID : SB30B.17508

Amount of Each Disbursement this Period

57.36

Full Name (Last, First, Middle Initial)

C. Trent Hagerty

Mailing Address 1923 Jasmine Dr

City	State	Zip Code
Indianapolis	IN	46219

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2012

Transaction ID : SB30B.17280

Amount of Each Disbursement this Period

1155.64

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

2406.99

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Trent Hagerty

Mailing Address 1923 Jasmine Dr

City	State	Zip Code
Indianapolis	IN	46219

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2012

Transaction ID : SB30B.17247

Amount of Each Disbursement this Period

1181.21

Full Name (Last, First, Middle Initial)

B. John Heldreth

Mailing Address 7140 N 900 E

City	State	Zip Code
Mentone	IN	46539

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2012

Transaction ID : SB30B.17277

Amount of Each Disbursement this Period

539.93

Full Name (Last, First, Middle Initial)

C. John Heldreth

Mailing Address 7140 N 900 E

City	State	Zip Code
Mentone	IN	46539

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2012

Transaction ID : SB30B.17289

Amount of Each Disbursement this Period

539.92

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

2261.06

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. John Heldreth

Mailing Address 7140 N 900 E

City	State	Zip Code
Mentone	IN	46539

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2012

Transaction ID : SB30B.17246

Amount of Each Disbursement this Period

539.93

Full Name (Last, First, Middle Initial)

B. Eric Holcomb

Mailing Address 8530 Silverleaf Ct.

City	State	Zip Code
Indianapolis	IN	46278

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2012

Transaction ID : SB30B.17286

Amount of Each Disbursement this Period

3240.70

Full Name (Last, First, Middle Initial)

C. Eric Holcomb

Mailing Address 8530 Silverleaf Ct.

City	State	Zip Code
Indianapolis	IN	46278

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2012

Transaction ID : SB30B.17339

Amount of Each Disbursement this Period

3209.06

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

6989.69

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Eric Holcomb

Mailing Address 8530 Silverleaf Ct.

City	State	Zip Code
Indianapolis	IN	46278

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2012

Transaction ID : SB30B.17250

Amount of Each Disbursement this Period

3420.06

Full Name (Last, First, Middle Initial)

B. Hot Box Pizza

Mailing Address 923 Indiana Ave.

City	State	Zip Code
Indianapolis	IN	46202

Purpose of Disbursement
FEA: Pizza for Volunteers - Paid by J. Knepper

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) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2012

Transaction ID : SB30B.17502

Amount of Each Disbursement this Period

38.82

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Matthew David Humm

Mailing Address 1016 Summer Hill

City	State	Zip Code
Carmel	IN	46032

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2012

Transaction ID : SB30B.17269

Amount of Each Disbursement this Period

939.49

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

4359.55

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Matthew David Humm

Mailing Address 1016 Summer Hill

City	State	Zip Code
Carmel	IN	46032

Purpose of Disbursement
FEA: Volunteer Meals Reimbursement

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2012

Transaction ID : SB30B.17497

Amount of Each Disbursement this Period

36.97

Full Name (Last, First, Middle Initial)

B. Matthew David Humm

Mailing Address 1016 Summer Hill

City	State	Zip Code
Carmel	IN	46032

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	2010
	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2012

Transaction ID : SB30B.17271

Amount of Each Disbursement this Period

939.48

Full Name (Last, First, Middle Initial)

C. Matthew David Humm

Mailing Address 1016 Summer Hill

City	State	Zip Code
Carmel	IN	46032

Purpose of Disbursement
FEA: Volunteer Meals Reimbursement

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2012

Transaction ID : SB30B.17530

Amount of Each Disbursement this Period

55.60

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

1032.05

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Matthew David Humm

Mailing Address 1016 Summer Hill

City	State	Zip Code
Carmel	IN	46032

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		15		2012

Transaction ID : SB30B.17236

Amount of Each Disbursement this Period

939.49

Full Name (Last, First, Middle Initial)

B. Matthew David Humm

Mailing Address 1016 Summer Hill

City	State	Zip Code
Carmel	IN	46032

Purpose of Disbursement
FEA: Volunteer Meals Reimbursement

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) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		15		2012

Transaction ID : SB30B.17551

Amount of Each Disbursement this Period

124.23

Full Name (Last, First, Middle Initial)

C. Jamestown Associates LLC

Mailing Address 5 Mapleton Road, Suite # 300

City	State	Zip Code
Princeton	NJ	08540

Purpose of Disbursement
FEA: Non-Allocable Mail

Candidate Name

RICHARD E MOURDOCK

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

State: IN District: 00

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		25		2012

Transaction ID : SB30B.17294

Amount of Each Disbursement this Period

34821.99

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

35885.71

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: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB30B

Transaction ID : SB30B.17294

This disbursement is for non-allocable campaign mail that was sent to voters. This disbursement is considered a public communication but is exempt activity and therefore not a contribution to any federal candidate because volunteers sorted and addressed the mail.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Jamestown Associates LLC

Mailing Address 5 Mapleton Road, Suite # 300

City	State	Zip Code
Princeton	NJ	08540

Purpose of Disbursement
FEA: Non-Allocable Mail

Candidate Name

RICHARD E MOURDOCK

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: IN District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2012

Transaction ID : SB30B.17295

Amount of Each Disbursement this Period

34821.99

Full Name (Last, First, Middle Initial)

B. Jimmy John's

Mailing Address 1 N Meridian Street

City	State	Zip Code
Indianapolis	IN	46204

Purpose of Disbursement
FEA: Meals for Volunteers - Paid by J. Knepper

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:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2012

Transaction ID : SB30B.17566

Amount of Each Disbursement this Period

157.51

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Kentucky Fried Chicken

Mailing Address 1428 E. Tenth Street

City	State	Zip Code
Jeffersonville	IN	47130

Purpose of Disbursement
FEA: Meals for Volunteers - Paid by M. Humm

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:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2012

Transaction ID : SB30B.17554

Amount of Each Disbursement this Period

35.61

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

34821.99

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: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB30B
Transaction ID : SB30B.17295

This disbursement is for non-allocable campaign mail that was sent to voters. This disbursement is considered a public communication but is exempt activity and therefore not a contribution to any federal candidate because volunteers sorted and addressed the mail.

Form/Schedule:
Transaction ID:

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Jenna Knepper

Mailing Address 970 University Blvd. Apt B

City	State	Zip Code
Indianapolis	IN	46202

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		18		2012

Transaction ID : SB30B.17273

Amount of Each Disbursement this Period

886.80

Full Name (Last, First, Middle Initial)

B. Jenna Knepper

Mailing Address 970 University Blvd. Apt B

City	State	Zip Code
Indianapolis	IN	46202

Purpose of Disbursement
FEA: Volunteer Meals Reimbursement

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) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		18		2012

Transaction ID : SB30B.17500

Amount of Each Disbursement this Period

91.63

Full Name (Last, First, Middle Initial)

C. Jenna Knepper

Mailing Address 970 University Blvd. Apt B

City	State	Zip Code
Indianapolis	IN	46202

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		01		2012

Transaction ID : SB30B.17274

Amount of Each Disbursement this Period

886.79

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

1865.22

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Jenna Knepper

Mailing Address 970 University Blvd. Apt B

City	State	Zip Code
Indianapolis	IN	46202

Purpose of Disbursement
FEA: Volunteer Meals Reimbursement

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) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2012

Transaction ID : SB30B.17536

Amount of Each Disbursement this Period

45.18

Full Name (Last, First, Middle Initial)

B. Jenna Knepper

Mailing Address 970 University Blvd. Apt B

City	State	Zip Code
Indianapolis	IN	46202

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2012

Transaction ID : SB30B.17234

Amount of Each Disbursement this Period

974.86

Full Name (Last, First, Middle Initial)

C. Jenna Knepper

Mailing Address 970 University Blvd. Apt B

City	State	Zip Code
Indianapolis	IN	46202

Purpose of Disbursement
FEA: Volunteer Meals Reimbursement

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) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2012

Transaction ID : SB30B.17564

Amount of Each Disbursement this Period

454.38

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

1474.42

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Krispy Kreme

Mailing Address 1122 Veterans Parkway

City	State	Zip Code
Clarksville	IN	47129

Purpose of Disbursement
FEA: Donuts for Volunteers - Paid by M. Humm

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2012

Transaction ID : SB30B.17532

Amount of Each Disbursement this Period

6.99

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Little Ceasar's Pizza

Mailing Address 138 W Hively Ave.

City	State	Zip Code
Elkhart	IN	46517

Purpose of Disbursement
FEA: Pizza for Volunteers - Paid by B. Parsons

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2012

Transaction ID : SB30B.17491

Amount of Each Disbursement this Period

16.05

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Little Ceasar's Pizza

Mailing Address 138 W Hively Ave.

City	State	Zip Code
Elkhart	IN	46517

Purpose of Disbursement
FEA: Pizza for Volunteers - Paid by S. Shafer

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2012

Transaction ID : SB30B.17495

Amount of Each Disbursement this Period

24.60

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 78 OF 182

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Little Ceasar's Pizza

Mailing Address 138 W Hively Ave.

City	State	Zip Code
Elkhart	IN	46517

Purpose of Disbursement
FEA: Pizza for Volunteers - Paid by J. Knepper

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2012

Transaction ID : SB30B.17501

Amount of Each Disbursement this Period

21.80

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Little Ceasar's Pizza

Mailing Address 138 W Hively Ave.

City	State	Zip Code
Elkhart	IN	46517

Purpose of Disbursement
FEA: Pizza for Volunteers - Paid by B. Parsons

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2012

Transaction ID : SB30B.17524

Amount of Each Disbursement this Period

16.05

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Little Ceasar's Pizza

Mailing Address 138 W Hively Ave.

City	State	Zip Code
Elkhart	IN	46517

Purpose of Disbursement
FEA: Pizza for Volunteers - Paid by J. Knepper

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2012

Transaction ID : SB30B.17567

Amount of Each Disbursement this Period

43.60

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Little Ceasar's Pizza

Mailing Address 138 W Hively Ave.

City	State	Zip Code
Elkhart	IN	46517

Purpose of Disbursement
FEA: Pizza for Volunteers - Paid by S. Shafer

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2012

Transaction ID : SB30B.17572

Amount of Each Disbursement this Period

35.30

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Mama Roma's

Mailing Address 3904 First Ave.

City	State	Zip Code
Evansville	IN	47715

Purpose of Disbursement
FEA: Pizza for Volunteers - Paid by T. Montigny

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2012

Transaction ID : SB30B.17506

Amount of Each Disbursement this Period

44.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Mama Roma's

Mailing Address 3904 First Ave.

City	State	Zip Code
Evansville	IN	47715

Purpose of Disbursement
FEA: Pizza for Volunteers - Paid by T. Montigny

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2012

Transaction ID : SB30B.17540

Amount of Each Disbursement this Period

69.00

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Mama Roma's

Mailing Address 3904 First Ave.

City	State	Zip Code
Evansville	IN	47715

Purpose of Disbursement
FEA: Pizza for Volunteers - Paid by T. Montigny

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2012

Transaction ID : SB30B.17547

Amount of Each Disbursement this Period

86.54

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Marsh Supermarket

Mailing Address 435 Town Center St.

City	State	Zip Code
Mooreville	IN	46158

Purpose of Disbursement
FEA: Food for Volunteers - Paid by A. Anders

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2012

Transaction ID : SB30B.17575

Amount of Each Disbursement this Period

44.67

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Martin's Supermarket

Mailing Address 1200 N Nappanee St.

City	State	Zip Code
Elkhart	IN	46514

Purpose of Disbursement
FEA: Donuts for Volunteers - Paid by B. Parsons

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2012

Transaction ID : SB30B.17492

Amount of Each Disbursement this Period

10.17

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Barbara L. McClellan

Mailing Address 1017 Liberty Dr.

City	State	Zip Code
Westfield	IN	46074

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		18		2012

Transaction ID : SB30B.17272

Amount of Each Disbursement this Period

1524.00

Full Name (Last, First, Middle Initial)

B. McDonalds

Mailing Address 2830 S Madison Ave.

City	State	Zip Code
Indianapolis	IN	46225

Purpose of Disbursement
FEA: Meals for Volunteers - Paid by J. Knepper

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		15		2012

Transaction ID : SB30B.17568

Amount of Each Disbursement this Period

88.06

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. McLaughlin & Associates

Mailing Address 566 South Route 303

City	State	Zip Code
Blauvelt	NY	10913

Purpose of Disbursement
FEA: Polling Expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		19		2012

Transaction ID : SB30B.17332

Amount of Each Disbursement this Period

61040.00

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

62564.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Mellon Trust of New England

Mailing Address PO Box 4038

City Woburn	State MA	Zip Code 01888
----------------	-------------	-------------------

Purpose of Disbursement
FEA: HSA Contributions

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2012

Transaction ID : SB30B.17351

Amount of Each Disbursement this Period

387.50

Full Name (Last, First, Middle Initial)

B. Mellon Trust of New England

Mailing Address PO Box 4038

City Woburn	State MA	Zip Code 01888
----------------	-------------	-------------------

Purpose of Disbursement
FEA: HSA Contributions

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2012

Transaction ID : SB30B.17318

Amount of Each Disbursement this Period

387.50

Full Name (Last, First, Middle Initial)

C. Mellon Trust of New England

Mailing Address PO Box 4038

City Woburn	State MA	Zip Code 01888
----------------	-------------	-------------------

Purpose of Disbursement
FEA: HSA Contributions

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2012

Transaction ID : SB30B.17305

Amount of Each Disbursement this Period

387.50

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

1162.50

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Merchants Garage

Mailing Address 31 South Meridian St.

City	State	Zip Code
Indianapolis	IN	46204

Purpose of Disbursement
FEA: Parking Expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2012

Transaction ID : SB30B.17320

Amount of Each Disbursement this Period

1450.00

Full Name (Last, First, Middle Initial)

B. Midwest Communications Group, LLC

Mailing Address PO Box 441

City	State	Zip Code
Franklin	IN	46131

Purpose of Disbursement
FEA: State Party Mailer - State Representative Mailer

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2012

Transaction ID : SB30B.17350

Amount of Each Disbursement this Period

3071.26

Full Name (Last, First, Middle Initial)

C. Monical's Pizza

Mailing Address 6010 W 86th Street

City	State	Zip Code
Indianapolis	IN	46278

Purpose of Disbursement
FEA: Pizza for Volunteers - Paid by T. Hagerty

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) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2012

Transaction ID : SB30B.17509

Amount of Each Disbursement this Period

57.36

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4521.26

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Troy A. Montigny

Mailing Address 2232 Arden Place

City	State	Zip Code
Greenwood	IN	46143

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2012

Transaction ID : SB30B.17275

Amount of Each Disbursement this Period

1089.83

Full Name (Last, First, Middle Initial)

B. Troy A. Montigny

Mailing Address 2232 Arden Place

City	State	Zip Code
Greenwood	IN	46143

Purpose of Disbursement
FEA: Volunteer Meals Reimbursement

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) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2012

Transaction ID : SB30B.17505

Amount of Each Disbursement this Period

44.00

Full Name (Last, First, Middle Initial)

C. Troy A. Montigny

Mailing Address 2232 Arden Place

City	State	Zip Code
Greenwood	IN	46143

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2012

Transaction ID : SB30B.17276

Amount of Each Disbursement this Period

917.56

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

2051.39

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Troy A. Montigny

Mailing Address 2232 Arden Place

City	State	Zip Code
Greenwood	IN	46143

Purpose of Disbursement
FEA: Volunteer Meals Reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2012

Transaction ID : SB30B.17539

Amount of Each Disbursement this Period

89.50

Full Name (Last, First, Middle Initial)

B. Troy A. Montigny

Mailing Address 2232 Arden Place

City	State	Zip Code
Greenwood	IN	46143

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2012

Transaction ID : SB30B.17235

Amount of Each Disbursement this Period

973.74

Full Name (Last, First, Middle Initial)

C. Troy A. Montigny

Mailing Address 2232 Arden Place

City	State	Zip Code
Greenwood	IN	46143

Purpose of Disbursement
FEA: Volunteer Meals Reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2012

Transaction ID : SB30B.17545

Amount of Each Disbursement this Period

123.59

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

1186.83

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Marina R. Nicholson

Mailing Address 3242 E Carol Ln.

City	State	Zip Code
Mooreville	IN	46158

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2012

Transaction ID : SB30B.17253

Amount of Each Disbursement this Period

974.05

Full Name (Last, First, Middle Initial)

B. Marina R. Nicholson

Mailing Address 3242 E Carol Ln.

City	State	Zip Code
Mooreville	IN	46158

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2012

Transaction ID : SB30B.17252

Amount of Each Disbursement this Period

974.04

Full Name (Last, First, Middle Initial)

C. Marina R. Nicholson

Mailing Address 3242 E Carol Ln.

City	State	Zip Code
Mooreville	IN	46158

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2012

Transaction ID : SB30B.17237

Amount of Each Disbursement this Period

965.12

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

2913.21

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Papa John's Pizza

Mailing Address 4204 N 1st Ave.

City	State	Zip Code
Evansville	IN	47710

Purpose of Disbursement
FEA: Pizza for Volunteers - Paid by M. Humm

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2012

Transaction ID : SB30B.17531

Amount of Each Disbursement this Period

29.88

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Papa John's Pizza

Mailing Address 4204 N 1st Ave.

City	State	Zip Code
Evansville	IN	47710

Purpose of Disbursement
FEA: Pizza for Volunteers - Paid by T. Montigny

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2012

Transaction ID : SB30B.17541

Amount of Each Disbursement this Period

20.50

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Papa John's Pizza

Mailing Address 4204 N 1st Ave.

City	State	Zip Code
Evansville	IN	47710

Purpose of Disbursement
FEA: Pizza for Volunteers - Paid by T. Montigny

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2012

Transaction ID : SB30B.17546

Amount of Each Disbursement this Period

22.50

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Papa John's Pizza

Mailing Address 4204 N 1st Ave.

City	State	Zip Code
Evansville	IN	47710

Purpose of Disbursement
FEA: Pizza for Volunteers - Paid by M. Humm

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2012

Transaction ID : SB30B.17556

Amount of Each Disbursement this Period

31.95

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Ben Parsons

Mailing Address 342 W Lusher Ave

City	State	Zip Code
Elkhart	IN	46517

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2012

Transaction ID : SB30B.17270

Amount of Each Disbursement this Period

933.90

Full Name (Last, First, Middle Initial)

C. Ben Parsons

Mailing Address 342 W Lusher Ave

City	State	Zip Code
Elkhart	IN	46517

Purpose of Disbursement
FEA: Volunteer Meals Reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2012

Transaction ID : SB30B.17490

Amount of Each Disbursement this Period

26.22

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

960.12

	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Ben Parsons

Category/
Type

1043.19

State: District:

B. Ben Parsons

Category/
Type

16.05

State: District:

C. Ben Parsons

Category/
Type

933.90

State: District:

1993.14

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Ben Parsons

Mailing Address 342 W Lusher Ave

City	State	Zip Code
Elkhart	IN	46517

Purpose of Disbursement
FEA: Volunteer Meals Reimbursement

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2012

Transaction ID : SB30B.17579

Amount of Each Disbursement this Period

74.65

Full Name (Last, First, Middle Initial)

B. Penn Station

Mailing Address 137 N. Burkhardt Rd

City	State	Zip Code
Evansville	IN	47715

Purpose of Disbursement
FEA: Meals for Volunteers - Paid by T. Montigny

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2012

Transaction ID : SB30B.17548

Amount of Each Disbursement this Period

14.55

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Pizza Hut

Mailing Address 2976 Highway 62

City	State	Zip Code
Jeffersonville	IN	47130

Purpose of Disbursement
FEA: Pizza for Volunteers - Paid by M. Humm

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2012

Transaction ID : SB30B.17552

Amount of Each Disbursement this Period

56.67

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

74.65

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Sarah E. Potasnik

Mailing Address 5410 Indianola Ave.

City	State	Zip Code
Indianapolis	IN	46220

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2012

Transaction ID : SB30B.17258

Amount of Each Disbursement this Period

1233.89

Full Name (Last, First, Middle Initial)

B. Sarah E. Potasnik

Mailing Address 5410 Indianola Ave.

City	State	Zip Code
Indianapolis	IN	46220

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2012

Transaction ID : SB30B.17259

Amount of Each Disbursement this Period

1065.05

Full Name (Last, First, Middle Initial)

C. Sarah E. Potasnik

Mailing Address 5410 Indianola Ave.

City	State	Zip Code
Indianapolis	IN	46220

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2012

Transaction ID : SB30B.17240

Amount of Each Disbursement this Period

2183.28

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

4482.22

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 92 OF 182

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Precision Marketing, Inc.

Mailing Address PO Box 7670

City	State	Zip Code
Arlington	VA	22207

Purpose of Disbursement	<input type="text"/>
FEA: State Party Direct Mail Production - September Mailing	

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		09		2012

Transaction ID : SB30B.17611

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Precision Marketing, Inc.

Mailing Address PO Box 7670

City	State	Zip Code
Arlington	VA	22207

Purpose of Disbursement	<input type="text"/>
FEA: State Party Direct Mail Production - September Housefile	

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		09		2012

Transaction ID : SB30B.17614

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Pete Seat

Mailing Address 2643 Autumn Dr.

City	State	Zip Code
Crown Point	IN	46307

Purpose of Disbursement	<input type="text"/>
FEA: Payroll	

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	2010
	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2012

Transaction ID : SB30B.17261

Amount of Each Disbursement this Period

1568.46

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

3568.46

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Pete Seat

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2012

Mailing Address 2643 Autumn Dr.

Transaction ID : SB30B.17255

City	State	Zip Code
Crown Point	IN	46307

Amount of Each Disbursement this Period

Purpose of Disbursement
FEA: PayrollCategory/
Type

1568.46

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Pete Seat

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2012

Mailing Address 2643 Autumn Dr.

Transaction ID : SB30B.17239

City	State	Zip Code
Crown Point	IN	46307

Amount of Each Disbursement this Period

Purpose of Disbursement
FEA: PayrollCategory/
Type

1568.46

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Stacey Shafer

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2012

Mailing Address 16364 Madison Rd

Transaction ID : SB30B.17256

City	State	Zip Code
South Bend	IN	46614

Amount of Each Disbursement this Period

Purpose of Disbursement
FEA: PayrollCategory/
Type

379.53

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

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

3516.45

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Stacey Shafer

Mailing Address 16364 Madison Rd

City	State	Zip Code
South Bend	IN	46614

Purpose of Disbursement
FEA: Volunteer Meals Reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2012

Transaction ID : SB30B.17494

Amount of Each Disbursement this Period

24.60

Full Name (Last, First, Middle Initial)

B. Stacey Shafer

Mailing Address 16364 Madison Rd

City	State	Zip Code
South Bend	IN	46614

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2012

Transaction ID : SB30B.17264

Amount of Each Disbursement this Period

379.52

Full Name (Last, First, Middle Initial)

C. Stacey Shafer

Mailing Address 16364 Madison Rd

City	State	Zip Code
South Bend	IN	46614

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2012

Transaction ID : SB30B.17251

Amount of Each Disbursement this Period

379.51

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

783.63

<input type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input checked="" type="checkbox"/>	30b

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Category/
Type

35.30

Category/
Type

1971.11

The three grids are separated by slashes. The first grid shows '11' with 'M' in the top-left and top-right cells. The second grid shows '01' with 'D' in the top-left and top-right cells. The third grid shows '2012' with 'Y' in the top-left, top-right, middle-right, and bottom-right cells.

A diagram of a rectangular frame with four vertical supports. The frame is represented by a rectangle with a thick border. Inside the rectangle, there are four vertical lines, one in each quadrant, representing supports. The top and bottom horizontal lines are thicker than the side vertical lines.

Category/
Type

2020.90

4027.31

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Tracy R. Smith

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2012

Mailing Address 3301 Lincoln Hill Rd.

Transaction ID : SB30B.17244

City	State	Zip Code
Martinsville	IN	46151

Amount of Each Disbursement this Period

1958.52

Purpose of Disbursement
FEA: Payroll

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. Southwest Publishing & Mailing

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		09		2012

Mailing Address 2600 NW Topeka Blvd.

Transaction ID : SB30B.17630

Amount of Each Disbursement this Period

499.59

City	State	Zip Code
Topeka	KS	66617

Purpose of Disbursement
FEA: State Party Direct Mail Printing - Setember Housefile

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. Southwest Publishing & Mailing

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		09		2012

Mailing Address 2600 NW Topeka Blvd.

Transaction ID : SB30B.17635

Amount of Each Disbursement this Period

155.41

City	State	Zip Code
Topeka	KS	66617

Purpose of Disbursement
FEA: State Party Direct Mail Printing - October Mailing (Partial Payment)

Candidate Name

Category/
Type

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

2613.52

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Southwest Publishing & Mailing

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		09		2012

Mailing Address 2600 NW Topeka Blvd.

Transaction ID : SB30B.17682

City	State	Zip Code
Topeka	KS	66617

Amount of Each Disbursement this Period

Purpose of Disbursement
FEA: State Party Direct Mail Printing - September MailingCategory/
Type

1754.22

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. TD Ameritrade

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2012

Mailing Address 4075 Sorrento Valley Blvd. Suite A

Transaction ID : SB30B.17357

City	State	Zip Code
San Diego	CA	92121

Amount of Each Disbursement this Period

Purpose of Disbursement
FEA: IRA ContributionsCategory/
Type

75.00

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. TD Ameritrade

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2012

Mailing Address 4075 Sorrento Valley Blvd. Suite A

Transaction ID : SB30B.17321

City	State	Zip Code
San Diego	CA	92121

Amount of Each Disbursement this Period

Purpose of Disbursement
FEA: IRA ContributionsCategory/
Type

75.00

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

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

1904.22

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. TD Ameritrade

Mailing Address 4075 Sorrento Valley Blvd. Suite A

City	State	Zip Code
San Diego	CA	92121

Purpose of Disbursement
FEA: IRA Contributions

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2012

Transaction ID : SB30B.17306

Amount of Each Disbursement this Period

75.00

Full Name (Last, First, Middle Initial)

B. Ross M Teare

Mailing Address 1418 Olde Briar In

City	State	Zip Code
Carmel	IN	46032

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2012

Transaction ID : SB30B.17257

Amount of Each Disbursement this Period

489.52

Full Name (Last, First, Middle Initial)

C. Ross M Teare

Mailing Address 1418 Olde Briar In

City	State	Zip Code
Carmel	IN	46032

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2012

Transaction ID : SB30B.17265

Amount of Each Disbursement this Period

538.24

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

1102.76

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Ross M Teare

Mailing Address 1418 Olde Briar In

City	State	Zip Code
Carmel	IN	46032

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2012

Transaction ID : SB30B.17241

Amount of Each Disbursement this Period

538.23

Full Name (Last, First, Middle Initial)

B. The Vanguard Group

Mailing Address 455 Devon Park Dr.

City	State	Zip Code
Wayne	PA	19087

Purpose of Disbursement
FEA: IRA Contributions

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2012

Transaction ID : SB30B.17358

Amount of Each Disbursement this Period

150.00

Full Name (Last, First, Middle Initial)

C. The Vanguard Group

Mailing Address 455 Devon Park Dr.

City	State	Zip Code
Wayne	PA	19087

Purpose of Disbursement
FEA: IRA Contributions

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2012

Transaction ID : SB30B.17325

Amount of Each Disbursement this Period

150.00

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

838.23

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. The Vanguard Group

Mailing Address 455 Devon Park Dr.

City	State	Zip Code
Wayne	PA	19087

Purpose of Disbursement
FEA: IRA Contributions

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2012

Transaction ID : SB30B.17307

Amount of Each Disbursement this Period

150.00

Full Name (Last, First, Middle Initial)

B. Brandon Tillberry

Mailing Address 6029 Thornwood Ct.

City	State	Zip Code
Indianapolis	IN	46250

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2012

Transaction ID : SB30B.17263

Amount of Each Disbursement this Period

514.21

Full Name (Last, First, Middle Initial)

C. Brandon Tillberry

Mailing Address 6029 Thornwood Ct.

City	State	Zip Code
Indianapolis	IN	46250

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2012

Transaction ID : SB30B.17268

Amount of Each Disbursement this Period

514.20

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

1178.41

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 101 OF 182

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Brandon Tillberry

Mailing Address 6029 Thornwood Ct.

City	State	Zip Code
Indianapolis	IN	46250

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2012

Transaction ID : SB30B.17242

Amount of Each Disbursement this Period

514.21

Full Name (Last, First, Middle Initial)

B. UBS Financial Services, Inc.

Mailing Address 8888 Keystone Crossing, 10th Floor

City	State	Zip Code
Indianapolis	IN	46240

Purpose of Disbursement
FEA: IRA Contributions

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2012

Transaction ID : SB30B.17355

Amount of Each Disbursement this Period

621.31

Full Name (Last, First, Middle Initial)

C. Verizon Wireless - Texas

Mailing Address P.O. Box 630024

City	State	Zip Code
Dallas	TX	75263

Purpose of Disbursement
FEA: Cell Phone Expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		09		2012

Transaction ID : SB30B.17341

Amount of Each Disbursement this Period

108.10

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

1243.62

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 102 OF 182

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Catherine M. Watkins

Mailing Address 669 White Ash Tr.

City	State	Zip Code
Mooresville	IN	46158

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2012

Transaction ID : SB30B.17267

Amount of Each Disbursement this Period

490.44

Full Name (Last, First, Middle Initial)

B. Catherine M. Watkins

Mailing Address 669 White Ash Tr.

City	State	Zip Code
Mooresville	IN	46158

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2012

Transaction ID : SB30B.17262

Amount of Each Disbursement this Period

490.44

Full Name (Last, First, Middle Initial)

C. Catherine M. Watkins

Mailing Address 669 White Ash Tr.

City	State	Zip Code
Mooresville	IN	46158

Purpose of Disbursement
FEA: Payroll

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2012

Transaction ID : SB30B.17243

Amount of Each Disbursement this Period

490.44

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

1471.32

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 103 OF 182

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Wells Fargo Advisors

Mailing Address 500 East 96th Street, Suite 100

City	State	Zip Code
Indianapolis	IN	46240

Purpose of Disbursement
FEA: IRA Contributions

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2012

Transaction ID : SB30B.17354

Amount of Each Disbursement this Period

656.16

Full Name (Last, First, Middle Initial)

B. Wells Fargo Advisors

Mailing Address 500 East 96th Street, Suite 100

City	State	Zip Code
Indianapolis	IN	46240

Purpose of Disbursement
FEA: IRA Contributions

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2012

Transaction ID : SB30B.17323

Amount of Each Disbursement this Period

656.16

Full Name (Last, First, Middle Initial)

C. Wells Fargo Advisors

Mailing Address 500 East 96th Street, Suite 100

City	State	Zip Code
Indianapolis	IN	46240

Purpose of Disbursement
FEA: IRA Contributions

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2012

Transaction ID : SB30B.17304

Amount of Each Disbursement this Period

656.16

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

1968.48

518549.77

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 104 OF 182

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Dot the I Design & Graphics

Nature of Debt (Purpose):

Direct Mail Deisgn - September Mailing -
ESTIMATE

Mailing Address 2814 Glendale Road

City State

Zip Code

Charlotte

NC

28209

Outstanding Balance Beginning This Period

600.00

Transaction ID : SD10.15922

Amount Incurred This Period

0.00

Payment This Period

600.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Dot the I Design & Graphics

Nature of Debt (Purpose):

Direct Mail Design - September Housefile -
ESTIMATE

Mailing Address 2814 Glendale Road

City State

Zip Code

Charlotte

NC

28209

Outstanding Balance Beginning This Period

600.00

Transaction ID : SD10.15925

Amount Incurred This Period

0.00

Payment This Period

600.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Dot the I Design & Graphics

Nature of Debt (Purpose):

Direct Mail Design - October Mailing
(ESTIMATE)

Mailing Address 2814 Glendale Road

City

State

Zip Code

Charlotte

NC

28209

Outstanding Balance Beginning This Period

600.00

Transaction ID : SD10.16766

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

600.00

1) SUBTOTALS This Period This Page (optional)..... ►

600.00

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 105 OF 182

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

FLS Connect

Nature of Debt (Purpose):

Telemarketing - IND202 (Estimate)

Mailing Address 7300 Hudson Blvd, Suite 270

City State

Zip Code

Saint Paul

MN

55128

Outstanding Balance Beginning This Period

1375.90

Transaction ID : SD10.12029

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1375.90

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Marion County Treasurer

Nature of Debt (Purpose):

Property Taxes

Mailing Address 200 E Washington

Suite 1001

City State

Zip Code

Indianapolis

IN

46204

Outstanding Balance Beginning This Period

1264.22

Transaction ID : SD10.9453

Amount Incurred This Period

0.00

Payment This Period

1264.22

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Midwest Communications Group, LLC

Nature of Debt (Purpose):

FEA: Obama/State Representative Mailer
(Estimate)

Mailing Address PO Box 441

City

State

Zip Code

Franklin

IN

46131

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.17686

Amount Incurred This Period

11896.90

Payment This Period

0.00

Outstanding Balance at Close of This Period

11896.90

1) SUBTOTALS This Period This Page (optional)..... ►

13272.80

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 106 OF 182

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Precision Marketing, Inc.

Nature of Debt (Purpose):

Direct Mail Production - September Mailing -
ESTIMATE

Mailing Address PO Box 7670

City State

Zip Code

Arlington

VA

22207

Outstanding Balance Beginning This Period

2500.00

Transaction ID : SD10.15923

Amount Incurred This Period

0.00

Payment This Period

2500.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Precision Marketing, Inc.

Nature of Debt (Purpose):

Direct Mail Production - September Housefile -
ESTIMATE

Mailing Address PO Box 7670

City State

Zip Code

Arlington

VA

22207

Outstanding Balance Beginning This Period

2500.00

Transaction ID : SD10.15926

Amount Incurred This Period

0.00

Payment This Period

2500.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Precision Marketing, Inc.

Nature of Debt (Purpose):

Direct Mail Production - October Mailing
(ESTIMATE)

Mailing Address PO Box 7670

City

State

Zip Code

Arlington

VA

22207

Outstanding Balance Beginning This Period

2500.00

Transaction ID : SD10.16767

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

1) SUBTOTALS This Period This Page (optional)..... ►

2500.00

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 107 OF 182

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Southwest Publishing & Mailing

Nature of Debt (Purpose):

Direct Mail Printing - September Mailing -
ESTIMATE

Mailing Address 2600 NW Topeka Blvd.

City State

Zip Code

Topeka

KS

66617

Outstanding Balance Beginning This Period

3345.00

Transaction ID : SD10.15921

Amount Incurred This Period

-421.30

Payment This Period

2923.70

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Southwest Publishing & Mailing

Nature of Debt (Purpose):

Direct Mail Printing - September Housefile -
ESTIMATE

Mailing Address 2600 NW Topeka Blvd.

City State

Zip Code

Topeka

KS

66617

Outstanding Balance Beginning This Period

3345.00

Transaction ID : SD10.15924

Amount Incurred This Period

-847.01

Payment This Period

2497.99

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Southwest Publishing & Mailing

Nature of Debt (Purpose):

Direct Mail Printing - October Mailing
(ESTIMATE)

Mailing Address 2600 NW Topeka Blvd.

City

State

Zip Code

Topeka

KS

66617

Outstanding Balance Beginning This Period

1852.05

Transaction ID : SD10.16765

Amount Incurred This Period

0.00

Payment This Period

777.05

Outstanding Balance at Close of This Period

1075.00

1) SUBTOTALS This Period This Page (optional)..... ►

1075.00

2) TOTALS This Period (last page this line number only)..... ►

17447.80

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

0.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

17447.80

: 97 'A-G79 @G B9CI G'H9LH'F9 @G H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SD10

Transaction ID : SD10.15921

The amount owed for this debt was an estimated \$3,345.00 and the actual amount of debt owed was \$2,923.70. This payment is reflected on Schedules E & 30b of the report. The negative amount is to zero out the remainder of the estimated debt.

Form/Schedule: SD10

Transaction ID: SD10.15924

The amount owed for this debt was an estimated \$3,345.00 and the actual amount of debt owed was \$2,497.99. This payment is reflected on Schedules E & 30b of the report. The negative amount is to zero out the remainder of the estimated debt.

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 109 OF 182
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) INDIANA REPUBLICAN STATE COMMITTEE, INC.		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00006486 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y		

Full Name (Last, First, Middle Initial) of Payee Chase Card Services		Date 10 / 26 / 2012	
Mailing Address P.O. Box 94014		Amount 26.55	
City Palatine	State IL	Zip Code 60094	
Purpose of Expenditure Credit Card: Website Against Joe Donnelly		Category/Type 	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: JOSEPH S DONNELLY		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 4241.74		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : SE.17601

Full Name (Last, First, Middle Initial) of Payee Dot the I Design & Graphics		Date 11 / 09 / 2012	
Mailing Address 2814 Glendale Road		Amount 240.00	
City Charlotte	State NC	Zip Code 28209	
Purpose of Expenditure Direct Mail Deisgn - September Mailing		Category/Type 	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: IN District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY / PAUL D. RYAN		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 22235.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : SE.17616

(a) SUBTOTAL of Itemized Independent Expenditures.....	266.55
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Peter J. Deputy

[Electronically Filed]

Date

12 / 05 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 110 OF 182
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) INDIANA REPUBLICAN STATE COMMITTEE, INC.		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00006486 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>		

Full Name (Last, First, Middle Initial) of Payee Dot the I Design & Graphics		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 2814 Glendale Road		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 11 / 09 / 2012 </div>	
City Charlotte	State NC	Zip Code 28209	Transaction ID : SE.17619
Purpose of Expenditure Direct Mail Design - September Housefile	Category/ Type	Office Sought: <input type="checkbox"/> House State: IN <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY / PAUL D. RYAN		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 22475.65 </div>	

Full Name (Last, First, Middle Initial) of Payee Dot the I Design & Graphics		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 2814 Glendale Road		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 11 / 09 / 2012 </div>	
City Charlotte	State NC	Zip Code 28209	Transaction ID : SE.17620
Purpose of Expenditure Direct Mail Design - September Housefile	Category/ Type	Office Sought: <input type="checkbox"/> House State: IN <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: RICHARD E MOURDOCK		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 5778.89 </div>	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 480.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> _____ </div>
(c) TOTAL Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> _____ </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Peter J. Deputy

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 111 OF 182
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) INDIANA REPUBLICAN STATE COMMITTEE, INC.	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00006486 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee GoDaddy.com [MEMO ITEM]		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">26</div> <div style="border: 1px solid black; padding: 2px;">2012</div> </div>
Mailing Address 14455 N Hayden Rd Suite 226		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">26.55</div>
City State Zip Code Scottsdale AZ 85260		
Purpose of Expenditure Website Against Joe Donnelly	Category/Type <div style="border: 1px solid black; padding: 2px; width: 50px;"></div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: JOSEPH S DONNELLY		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">4241.74</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : SE.17603

Full Name (Last, First, Middle Initial) of Payee Gridiron Communications LLC		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">19</div> <div style="border: 1px solid black; padding: 2px;">2012</div> </div>
Mailing Address 50710 Princess Way Suite 100		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">380.81</div>
City State Zip Code Granger IN 46530		
Purpose of Expenditure Absentee Ballot Chase Mail	Category/Type <div style="border: 1px solid black; padding: 2px; width: 50px;"></div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: RICHARD E MOURDOCK		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">4215.19</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : SE.17640

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; width: 150px;">380.81</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; width: 150px;"></div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; width: 150px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Peter J. Deputy

[Electronically Filed]

Date

Signature

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05

2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 112 OF 182
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) INDIANA REPUBLICAN STATE COMMITTEE, INC.		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00006486 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>		

Full Name (Last, First, Middle Initial) of Payee Gridiron Communications LLC		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 50710 Princess Way Suite 100		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 10 / 19 / 2012 </div>	
City Granger	State IN	Zip Code 46530	Transaction ID : SE.17641
Purpose of Expenditure Absentee Ballot Chase Mail	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: IN <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: JOEL JEFFREY PHELPS		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Gridiron Communications LLC		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 50710 Princess Way Suite 100		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 10 / 19 / 2012 </div>	
City Granger	State IN	Zip Code 46530	Transaction ID : SE.17642
Purpose of Expenditure Absentee Ballot Chase Mail	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: IN <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: JACKIE (SWIHART) WALORSKI		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">76.50</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Peter J. Deputy

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 113 OF 182
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) INDIANA REPUBLICAN STATE COMMITTEE, INC.		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00006486 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M M / D D D / Y Y Y Y Y Y </div>		

Full Name (Last, First, Middle Initial) of Payee Gridiron Communications LLC		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M M / D D D / Y Y Y Y Y Y </div>	
Mailing Address 50710 Princess Way Suite 100		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 45.93 </div>	
City Granger	State IN	Zip Code 46530	Transaction ID : SE.17643
Purpose of Expenditure Absentee Ballot Chase Mail	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IN District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: MARLIN A STUTZMAN		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 206.68 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Gridiron Communications LLC		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M M / D D D / Y Y Y Y Y Y </div>	
Mailing Address 50710 Princess Way Suite 100		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 40.97 </div>	
City Granger	State IN	Zip Code 46530	Transaction ID : SE.17644
Purpose of Expenditure Absentee Ballot Chase Mail	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IN District: 04
Name of Federal Candidate Supported or Opposed by Expenditure: THEODORE EDWARD ROKITA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 167.56 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">86.90</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Peter J. Deputy

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 114 OF 182
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) INDIANA REPUBLICAN STATE COMMITTEE, INC.		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00006486 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY		

Full Name (Last, First, Middle Initial) of Payee Gridiron Communications LLC		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 50710 Princess Way Suite 100		Amount 71.42	
City Granger	State IN	Zip Code 46530	Transaction ID : SE.17645
Purpose of Expenditure Absentee Ballot Chase Mail	Category/ Type 	Office Sought: <input checked="" type="checkbox"/> House State: <u>IN</u> <input type="checkbox"/> Senate District: <u>05</u> <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: SUSAN MRS. BROOKS		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 300.20		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 	

Full Name (Last, First, Middle Initial) of Payee Gridiron Communications LLC		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 50710 Princess Way Suite 100		Amount 43.21	
City Granger	State IN	Zip Code 46530	Transaction ID : SE.17646
Purpose of Expenditure Absentee Ballot Chase Mail	Category/ Type 	Office Sought: <input checked="" type="checkbox"/> House State: <u>IN</u> <input type="checkbox"/> Senate District: <u>06</u> <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: ALLEN LUCAS MESSER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 152.94		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 	

(a) SUBTOTAL of Itemized Independent Expenditures.....	114.63
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Peter J. Deputy

[Electronically Filed]

Date

MM / DD / YYYY
 12 / 05 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 115 OF 182
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) INDIANA REPUBLICAN STATE COMMITTEE, INC.		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00006486 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>		

Full Name (Last, First, Middle Initial) of Payee Gridiron Communications LLC		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 50710 Princess Way Suite 100		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 10 / 19 / 2012 </div>	
City Granger	State IN	Zip Code 46530	Transaction ID : SE.17647
Purpose of Expenditure Absentee Ballot Chase Mail	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: IN <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: CARLOS ANDREW MAY		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 126.90 </div>	

Full Name (Last, First, Middle Initial) of Payee Gridiron Communications LLC		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 50710 Princess Way Suite 100		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 10 / 19 / 2012 </div>	
City Granger	State IN	Zip Code 46530	Transaction ID : SE.17648
Purpose of Expenditure Absentee Ballot Chase Mail	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: IN <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: LARRY D BUCSHON		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 146.70 </div>	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">68.81</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Peter J. Deputy

[Electronically Filed]

Date

Signature

M M / D D / Y Y Y Y Y Y

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 116 OF 182
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) INDIANA REPUBLICAN STATE COMMITTEE, INC.		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00006486 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M M / D D D / Y Y Y Y Y Y </div>		

Full Name (Last, First, Middle Initial) of Payee Gridiron Communications LLC		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M M / D D D / Y Y Y Y Y Y </div>	
Mailing Address 50710 Princess Way Suite 100		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 40.54 </div>	
City Granger	State IN	Zip Code 46530	Transaction ID : SE.17649
Purpose of Expenditure Absentee Ballot Chase Mail	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 09	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: TODD CHRISTOPHER YOUNG		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 202.38 </div>	

Full Name (Last, First, Middle Initial) of Payee Gridiron Communications LLC		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M M / D D D / Y Y Y Y Y Y </div>	
Mailing Address 50710 Princess Way Suite 100		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 217.34 </div>	
City Granger	State IN	Zip Code 46530	Transaction ID : SE.17650
Purpose of Expenditure Absentee Ballot Chase Mail	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: _____	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: RICHARD E MOURDOCK		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 4459.08 </div>	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 257.88 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> _____ </div>
(c) TOTAL Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> _____ </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Peter J. Deputy

[Electronically Filed]

Date

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 117 OF 182
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) INDIANA REPUBLICAN STATE COMMITTEE, INC.		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00006486 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>		

Full Name (Last, First, Middle Initial) of Payee Gridiron Communications LLC		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 50710 Princess Way Suite 100		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 10 / 26 / 2012 </div>	
City Granger	State IN	Zip Code 46530	Transaction ID : SE.17651
Purpose of Expenditure Absentee Ballot Chase Mail	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: IN <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: JOEL JEFFREY PHELPS		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Gridiron Communications LLC		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 50710 Princess Way Suite 100		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 10 / 26 / 2012 </div>	
City Granger	State IN	Zip Code 46530	Transaction ID : SE.17652
Purpose of Expenditure Absentee Ballot Chase Mail	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: IN <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: JACKIE (SWIHART) WALORSKI		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">54.43</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Peter J. Deputy

[Electronically Filed]

Date

Signature

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 118 OF 182
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) INDIANA REPUBLICAN STATE COMMITTEE, INC.		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00006486 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY		

Full Name (Last, First, Middle Initial) of Payee Gridiron Communications LLC		Date MM / DD / YYYY 10 / 26 / 2012	
Mailing Address 50710 Princess Way Suite 100		Amount 20.21	
City Granger	State IN	Zip Code 46530	Transaction ID : SE.17653
Purpose of Expenditure Absentee Ballot Chase Mail	Category/ Type 	Office Sought: <input checked="" type="checkbox"/> House State: <u>IN</u> <input type="checkbox"/> Senate District: <u>03</u> <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: MARLIN A STUTZMAN		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 226.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 	

Full Name (Last, First, Middle Initial) of Payee Gridiron Communications LLC		Date MM / DD / YYYY 10 / 26 / 2012	
Mailing Address 50710 Princess Way Suite 100		Amount 23.06	
City Granger	State IN	Zip Code 46530	Transaction ID : SE.17654
Purpose of Expenditure Absentee Ballot Chase Mail	Category/ Type 	Office Sought: <input checked="" type="checkbox"/> House State: <u>IN</u> <input type="checkbox"/> Senate District: <u>04</u> <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: THEODORE EDWARD ROKITA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 190.62		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 	

(a) SUBTOTAL of Itemized Independent Expenditures.....	43.27
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Peter J. Deputy

[Electronically Filed]

Date

MM / DD / YYYY
 12 / 05 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 119 OF 182
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) INDIANA REPUBLICAN STATE COMMITTEE, INC.		FEC IDENTIFICATION NUMBER ▼ C C00006486
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee Gridiron Communications LLC		Date MM / DD / YYYY 10 / 26 / 2012
Mailing Address 50710 Princess Way Suite 100		Amount 38.87
City Granger	State IN	Zip Code 46530
Purpose of Expenditure Absentee Ballot Chase Mail	Category/Type	Transaction ID : SE.17655
Name of Federal Candidate Supported or Opposed by Expenditure: SUSAN MRS. BROOKS		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 05
Calendar Year-To-Date Per Election for Office Sought 339.07		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Gridiron Communications LLC		Date MM / DD / YYYY 10 / 26 / 2012
Mailing Address 50710 Princess Way Suite 100		Amount 25.85
City Granger	State IN	Zip Code 46530
Purpose of Expenditure Absentee Ballot Chase Mail	Category/Type	Transaction ID : SE.17656
Name of Federal Candidate Supported or Opposed by Expenditure: ALLEN LUCAS MESSER		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 06
Calendar Year-To-Date Per Election for Office Sought 178.79		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	64.72
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Peter J. Deputy

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12 / 05 / 2012

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 120 OF 182
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) INDIANA REPUBLICAN STATE COMMITTEE, INC.		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00006486 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY		

Full Name (Last, First, Middle Initial) of Payee Gridiron Communications LLC		Date MM / DD / YYYY 10 / 26 / 2012	
Mailing Address 50710 Princess Way Suite 100		Amount 16.74	
City Granger	State IN	Zip Code 46530	Transaction ID : SE.17657
Purpose of Expenditure Absentee Ballot Chase Mail	Category/ Type 	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <u>IN</u> District: <u>07</u>	
Name of Federal Candidate Supported or Opposed by Expenditure: CARLOS ANDREW MAY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 143.64		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) 	

Full Name (Last, First, Middle Initial) of Payee Gridiron Communications LLC		Date MM / DD / YYYY 10 / 26 / 2012	
Mailing Address 50710 Princess Way Suite 100		Amount 15.99	
City Granger	State IN	Zip Code 46530	Transaction ID : SE.17658
Purpose of Expenditure Absentee Ballot Chase Mail	Category/ Type 	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <u>IN</u> District: <u>08</u>	
Name of Federal Candidate Supported or Opposed by Expenditure: LARRY D BUCSHON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 162.69		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) 	

(a) SUBTOTAL of Itemized Independent Expenditures.....	32.73
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Peter J. Deputy

[Electronically Filed]

Date

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 12 / 05 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 121 OF 182
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) INDIANA REPUBLICAN STATE COMMITTEE, INC.		FEC IDENTIFICATION NUMBER ▼ C C00006486																								
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <table border="1" style="display:inline-table; margin-left:10px"> <tr><td>M</td><td>M</td><td></td></tr> <tr><td></td><td></td><td></td></tr> </table> / <table border="1" style="display:inline-table; margin-left:10px"> <tr><td>D</td><td>D</td><td></td></tr> <tr><td></td><td></td><td></td></tr> </table> / <table border="1" style="display:inline-table; margin-left:10px"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table>			M	M					D	D					Y	Y	Y	Y	Y	Y						
M	M																									
D	D																									
Y	Y	Y	Y	Y	Y																					

Full Name (Last, First, Middle Initial) of Payee Gridiron Communications LLC		Date <table border="1" style="display:inline-table">10</table> / <table border="1" style="display:inline-table">26</table> / <table border="1" style="display:inline-table">2012</table>
Mailing Address 50710 Princess Way Suite 100		Amount <table border="1" style="display:inline-table; width:100%">20.02</table>
City Granger	State IN	
Purpose of Expenditure Absentee Ballot Chase Mail	Category/ Type	Transaction ID : SE.17659
Name of Federal Candidate Supported or Opposed by Expenditure: TODD CHRISTOPHER YOUNG		Office Sought: <input checked="" type="checkbox"/> House State: <u>IN</u> <input type="checkbox"/> Senate District: <u>09</u> <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <table border="1" style="display:inline-table; width:100%">222.40</table>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Gridiron Communications LLC		Date <table border="1" style="display:inline-table">11</table> / <table border="1" style="display:inline-table">01</table> / <table border="1" style="display:inline-table">2012</table>
Mailing Address 50710 Princess Way Suite 100		Amount <table border="1" style="display:inline-table; width:100%">79.81</table>
City Granger	State IN	
Purpose of Expenditure Absentee Ballot Chase Mail	Category/ Type	Transaction ID : SE.17660
Name of Federal Candidate Supported or Opposed by Expenditure: RICHARD E MOURDOCK		Office Sought: <input type="checkbox"/> House State: <u>IN</u> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <table border="1" style="display:inline-table; width:100%">4538.89</table>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<table border="1" style="display:inline-table; width:100%">99.83</table>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<table border="1" style="display:inline-table; width:100%"> </table>
(c) TOTAL Independent Expenditures.....▶	<table border="1" style="display:inline-table; width:100%"> </table>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Peter J. Deputy

[Electronically Filed]

Date

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 122 OF 182
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) INDIANA REPUBLICAN STATE COMMITTEE, INC.		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00006486 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>		

Full Name (Last, First, Middle Initial) of Payee Gridiron Communications LLC		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 50710 Princess Way Suite 100		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 11 / 01 / 2012 </div>	
City Granger	State IN	Zip Code 46530	Transaction ID : SE.17661
Purpose of Expenditure Absentee Ballot Chase Mail	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: IN <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: JOEL JEFFREY PHELPS		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Gridiron Communications LLC		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 50710 Princess Way Suite 100		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 11 / 01 / 2012 </div>	
City Granger	State IN	Zip Code 46530	Transaction ID : SE.17662
Purpose of Expenditure Absentee Ballot Chase Mail	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: IN <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: JACKIE (SWIHART) WALORSKI		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">16.55</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Peter J. Deputy

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Date

Signature

M M / D D / Y Y Y Y Y Y

 12 / 05 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 123 OF 182
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) INDIANA REPUBLICAN STATE COMMITTEE, INC.		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00006486 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>		

Full Name (Last, First, Middle Initial) of Payee Gridiron Communications LLC		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y 11 / 01 / 2012 </div>	
Mailing Address 50710 Princess Way Suite 100		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; width: 150px; text-align: right;"> 9.55 </div>	
City Granger	State IN	Zip Code 46530	Transaction ID : SE.17663
Purpose of Expenditure Absentee Ballot Chase Mail	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: IN <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: MARLIN A STUTZMAN		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; width: 150px; text-align: right;"> 236.44 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Gridiron Communications LLC		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y 11 / 01 / 2012 </div>	
Mailing Address 50710 Princess Way Suite 100		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; width: 150px; text-align: right;"> 6.82 </div>	
City Granger	State IN	Zip Code 46530	Transaction ID : SE.17664
Purpose of Expenditure Absentee Ballot Chase Mail	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: IN <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: THEODORE EDWARD ROKITA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; width: 150px; text-align: right;"> 197.44 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px; width: 150px; text-align: right;"> 16.37 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="display: inline-block; border: 1px solid black; padding: 2px; width: 150px; text-align: right;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px; width: 150px; text-align: right;"> 16.37 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Peter J. Deputy

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Date

Signature

M M / D D / Y Y Y Y Y Y
 12 / 05 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 124 OF 182
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) INDIANA REPUBLICAN STATE COMMITTEE, INC.		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00006486 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>		

Full Name (Last, First, Middle Initial) of Payee Gridiron Communications LLC		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 50710 Princess Way Suite 100		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 11 / 01 / 2012 </div>	
City Granger	State IN	Zip Code 46530	Transaction ID : SE.17665
Purpose of Expenditure Absentee Ballot Chase Mail	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: IN <input type="checkbox"/> Senate District: 05 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: SUSAN MRS. BROOKS		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Gridiron Communications LLC		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 50710 Princess Way Suite 100		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 11 / 01 / 2012 </div>	
City Granger	State IN	Zip Code 46530	Transaction ID : SE.17666
Purpose of Expenditure Absentee Ballot Chase Mail	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: IN <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: ALLEN LUCAS MESSER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">23.25</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Peter J. Deputy

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Date

Signature

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 12 / 05 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 125 OF 182
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) INDIANA REPUBLICAN STATE COMMITTEE, INC.		FEC IDENTIFICATION NUMBER ▼ C C00006486	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> </div>	

Full Name (Last, First, Middle Initial) of Payee Gridiron Communications LLC		Date <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> </div>	
Mailing Address 50710 Princess Way Suite 100		Amount <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> </div>	
City Granger	State IN	Zip Code 46530	Transaction ID : SE.17668
Purpose of Expenditure Absentee Ballot Chase Mail	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IN District: 07
Name of Federal Candidate Supported or Opposed by Expenditure: CARLOS ANDREW MAY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee Gridiron Communications LLC		Date <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> </div>	
Mailing Address 50710 Princess Way Suite 100		Amount <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> </div>	
City Granger	State IN	Zip Code 46530	Transaction ID : SE.17669
Purpose of Expenditure Absentee Ballot Chase Mail	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IN District: 08
Name of Federal Candidate Supported or Opposed by Expenditure: LARRY D BUCSHON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> </div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Peter J. Deputy

[Electronically Filed]

Date

Signature

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 126 OF 182
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) INDIANA REPUBLICAN STATE COMMITTEE, INC.		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00006486 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY		

Full Name (Last, First, Middle Initial) of Payee Gridiron Communications LLC		Date MM / DD / YYYY 11 / 01 / 2012	
Mailing Address 50710 Princess Way Suite 100		Amount 10.17	
City Granger	State IN	Zip Code 46530	Transaction ID : SE.17670
Purpose of Expenditure Absentee Ballot Chase Mail	Category/ Type 	Office Sought: <input checked="" type="checkbox"/> House State: IN <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: TODD CHRISTOPHER YOUNG		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 232.57		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 	

Full Name (Last, First, Middle Initial) of Payee Midwest Communications Group, LLC		Date MM / DD / YYYY 11 / 01 / 2012	
Mailing Address PO Box 441		Amount 5948.45	
City Franklin	State IN	Zip Code 46131	Transaction ID : SE.16815
Purpose of Expenditure Obama/State Representative Mailer (ESTIMATE)	Category/ Type 	Office Sought: <input type="checkbox"/> House State: IN <input type="checkbox"/> Senate District: <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 20995.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 	

(a) SUBTOTAL of Itemized Independent Expenditures.....	10.17
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Peter J. Deputy

[Electronically Filed]

Date

MM / DD / YYYY
 12 / 05 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 127 OF 182
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) INDIANA REPUBLICAN STATE COMMITTEE, INC.		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00006486 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name (Last, First, Middle Initial) of Payee Midwest Communications Group, LLC		Date MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">11 / 02 / 2012</div>	
[MEMO ITEM] Mailing Address PO Box 441		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">3071.26</div>	
City Franklin	State IN	Zip Code 46131	Transaction ID : SE.16819
Purpose of Expenditure Obama/State Representative Mailer (ESTIMATE)	Category/ Type	Office Sought: <input type="checkbox"/> House State: IN <input type="checkbox"/> Senate District: <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">20995.65</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee Midwest Communications Group, LLC		Date MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">11 / 09 / 2012</div>	
Mailing Address PO Box 441		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">3071.26</div>	
City Franklin	State IN	Zip Code 46131	Transaction ID : SE.17679
Purpose of Expenditure Obama/State Representative Mailer	Category/ Type	Office Sought: <input type="checkbox"/> House State: IN <input type="checkbox"/> Senate District: <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">28026.41</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">3071.26</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Peter J. Deputy

[Electronically Filed]

Date

 MM / DD / YYYY

12 / 05 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 128 OF 182
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) INDIANA REPUBLICAN STATE COMMITTEE, INC.		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00006486 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>		

Full Name (Last, First, Middle Initial) of Payee Precision Marketing, Inc.		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address PO Box 7670		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 11 / 09 / 2012 </div>	
City Arlington	State VA	Zip Code 22207	Transaction ID : SE.17612
Purpose of Expenditure Direct Mail Production - September Housefile	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	Office Sought: <input type="checkbox"/> House State: IN <input type="checkbox"/> Senate District: <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY / PAUL D. RYAN		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> 21995.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee Precision Marketing, Inc.		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address PO Box 7670		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 11 / 09 / 2012 </div>	
City Arlington	State VA	Zip Code 22207	Transaction ID : SE.17613
Purpose of Expenditure Direct Mail Production - September Housefile	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	Office Sought: <input type="checkbox"/> House State: IN <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: RICHARD E MOURDOCK		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> 5538.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">2000.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Peter J. Deputy
[Electronically Filed]

Date

Signature

M M / D D / Y Y Y Y Y Y

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 129 OF 182
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) INDIANA REPUBLICAN STATE COMMITTEE, INC.		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00006486 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M M / D D D / Y Y Y Y Y Y </div>		

Full Name (Last, First, Middle Initial) of Payee Precision Marketing, Inc.		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M M / D D D / Y Y Y Y Y Y </div>	
Mailing Address PO Box 7670		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 11 / 09 / 2012 </div>	
City Arlington	State VA	Zip Code 22207	Transaction ID : SE.17685
Purpose of Expenditure Direct Mail Production - September Mailing	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: IN District: Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY / PAUL D. RYAN		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 29026.41 </div>			

Full Name (Last, First, Middle Initial) of Payee Southwest Publishing & Mailing		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M M / D D D / Y Y Y Y Y Y </div>	
Mailing Address 2600 NW Topeka Blvd.		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 11 / 09 / 2012 </div>	
City Topeka	State KS	Zip Code 66617	Transaction ID : SE.17622
Purpose of Expenditure Direct Mail Printing - September Mailing	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: IN District: Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY / PAUL D. RYAN		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 23645.13 </div>			

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">2169.48</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Peter J. Deputy

Signature

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 130 OF 182
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) INDIANA REPUBLICAN STATE COMMITTEE, INC.		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00006486 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>		

Full Name (Last, First, Middle Initial) of Payee Southwest Publishing & Mailing		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y 11 / 09 / 2012 </div>	
Mailing Address 2600 NW Topeka Blvd.		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 999.20 </div>	
City Topeka	State KS	Zip Code 66617	Transaction ID : SE.17628
Purpose of Expenditure Direct Mail Printing - September Housefile	Category/ Type	Office Sought: <input type="checkbox"/> House State: <u>IN</u> <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY / PAUL D. RYAN		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 24644.33 </div>		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 2012 </div>	

Full Name (Last, First, Middle Initial) of Payee Southwest Publishing & Mailing		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y 11 / 09 / 2012 </div>	
Mailing Address 2600 NW Topeka Blvd.		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 999.20 </div>	
City Topeka	State KS	Zip Code 66617	Transaction ID : SE.17629
Purpose of Expenditure Direct Mail Printing - September Housefile	Category/ Type	Office Sought: <input type="checkbox"/> House State: <u>IN</u> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: RICHARD E MOURDOCK		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 6778.09 </div>		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 2012 </div>	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 1998.40 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 1998.40 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Peter J. Deputy

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 05 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 131 OF 182
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) INDIANA REPUBLICAN STATE COMMITTEE, INC.		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00006486 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y		

Full Name (Last, First, Middle Initial) of Payee Southwest Publishing & Mailing		Date 11 / 09 / 2012	
Mailing Address 2600 NW Topeka Blvd.		Amount 310.82	
City Topeka	State KS	Zip Code 66617	
Purpose of Expenditure Direct Mail Printing - October Mailing (Partial Payment)		Category/ Type 	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: <u>IN</u> District: <u> </u>
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY / PAUL D. RYAN		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 24955.15		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) 	

Transaction ID : SE.17633

Full Name (Last, First, Middle Initial) of Payee Southwest Publishing & Mailing		Date 11 / 09 / 2012	
Mailing Address 2600 NW Topeka Blvd.		Amount 310.82	
City Topeka	State KS	Zip Code 66617	
Purpose of Expenditure Direct Mail Printing - October Mailing (Partial Payment)		Category/ Type 	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <u>IN</u> District: <u> </u>
Name of Federal Candidate Supported or Opposed by Expenditure: RICHARD E MOURDOCK		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 7088.91		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) 	

Transaction ID : SE.17634

(a) SUBTOTAL of Itemized Independent Expenditures.....	621.64
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	11966.95

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Peter J. Deputy

[Electronically Filed]

Date

12 / 05 / 2012

Signature

SCHEDULE F (FEC Form 3X)
**ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 132 OF 182

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Has your committee been designated to make coordinated expenditures by a political party committee?

☐ YES ☒ NO

If YES, name the designating committee:

Full Name of Subordinate Committee

Mailing Address

City State ZIP Code

Full Name (Last, First, Middle Initial) of Each Payee

Airnet

Mailing Address PO Box 11181

City State Zip Code
Chattanooga TN 37401Name of Federal Candidate Supported Office Sought: State: District:
RICHARD E MOURDOCK ☒ House IN 00
Senate
PresidentialAggregate General Election Expenditure for this Candidate ▶ 16704.30
Transaction ID : SF.17671Purpose of Expenditure
Volunteer Voter ID Phone
Bank MinutesCategory/
TypeDate
M M / D D / Y Y Y Y Y Y
11 09 2012Amount
4548.02

Full Name (Last, First, Middle Initial) of Each Payee

Airnet

Mailing Address PO Box 11181

City State Zip Code
Chattanooga TN 37401Name of Federal Candidate Supported Office Sought: State: District:
TODD CHRISTOPHER YOUNG ☒ House IN 09
Senate
PresidentialAggregate General Election Expenditure for this Candidate ▶ 2320.16
Transaction ID : SF.17672Purpose of Expenditure
Volunteer Voter ID Phone
Bank MinutesCategory/
TypeDate
M M / D D / Y Y Y Y Y Y
11 09 2012Amount
577.91

Full Name (Last, First, Middle Initial) of Each Payee

Airnet

Mailing Address PO Box 11181

City State Zip Code
Chattanooga TN 37401Name of Federal Candidate Supported Office Sought: State: District:
MARLIN A STUTZMAN ☒ House IN 03
Senate
PresidentialAggregate General Election Expenditure for this Candidate ▶ 1693.29
Transaction ID : SF.17673Purpose of Expenditure
Volunteer Voter ID Phone
Bank MinutesCategory/
TypeDate
M M / D D / Y Y Y Y Y Y
11 09 2012Amount
448.00

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

5573.93

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

SCHEDULE F (FEC Form 3X)
**ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 133 OF 182

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) INDIANA REPUBLICAN STATE COMMITTEE, INC.			
Has your committee been designated to make coordinated expenditures by a political party committee? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, name the designating committee:		Full Name of Subordinate Committee Mailing Address City _____ State _____ ZIP Code _____	

Full Name (Last, First, Middle Initial) of Each Payee Airnet		Purpose of Expenditure Volunteer Voter ID Phone Bank Minutes		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> Category/ Type
Mailing Address PO Box 11181		Date <div style="display: flex; justify-content: space-around; font-family: monospace;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-around; font-size: 1.2em;"> 11 09 2012 </div>		
City Chattanooga	State TN	Zip Code 37401		
Name of Federal Candidate Supported THEODORE EDWARD ROKITA	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: IN	District: 04	
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; padding: 2px; display: inline-block;">2337.19</div>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: right;">779.79</div>		
Transaction ID : SF.17674				

Full Name (Last, First, Middle Initial) of Each Payee Airnet		Purpose of Expenditure Volunteer Voter ID Phone Bank Minutes		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> Category/ Type
Mailing Address PO Box 11181		Date <div style="display: flex; justify-content: space-around; font-family: monospace;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-around; font-size: 1.2em;"> 11 09 2012 </div>		
City Chattanooga	State TN	Zip Code 37401		
Name of Federal Candidate Supported LARRY D BUCSHON	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: IN	District: 08	
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; padding: 2px; display: inline-block;">2237.27</div>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: right;">651.21</div>		
Transaction ID : SF.17675				

Full Name (Last, First, Middle Initial) of Each Payee Airnet		Purpose of Expenditure Volunteer Voter ID Phone Bank Minutes		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> Category/ Type
Mailing Address PO Box 11181		Date <div style="display: flex; justify-content: space-around; font-family: monospace;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-around; font-size: 1.2em;"> 11 09 2012 </div>		
City Chattanooga	State TN	Zip Code 37401		
Name of Federal Candidate Supported JACKIE (SWIHART) WALORSKI	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: IN	District: 02	
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; padding: 2px; display: inline-block;">3517.87</div>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: right;">1133.14</div>		
Transaction ID : SF.17676				

SUBTOTAL of Expenditures This Page (optional)..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">2564.14</div>
TOTAL This Period (last page this line number only)..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

SCHEDULE F (FEC Form 3X)**ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 134 OF 182

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.Has your committee been designated to make
coordinated expenditures by a political party committee?☐ YES ☒ NO

If YES, name the designating committee:

Full Name of Subordinate Committee

Mailing Address

City State ZIP Code

Full Name (Last, First, Middle Initial) of Each Payee

Airnet

Mailing Address PO Box 11181

City State Zip Code
Chattanooga TN 37401Name of Federal Candidate Supported Office Sought: ☒ House State: IN
JOEL JEFFREY PHELPS ☐ Senate District: 01
☐ PresidentialAggregate General Election
Expenditure for this Candidate ► 1875.14

Transaction ID : SF.17677

Purpose of Expenditure
Volunteer Voter ID Phone
Bank MinutesCategory/
Type

Date

M M / D D / Y Y Y Y Y Y
11 09 2012

Amount

462.77

Full Name (Last, First, Middle Initial) of Each Payee

Airnet

Mailing Address PO Box 11181

City State Zip Code
Chattanooga TN 37401Name of Federal Candidate Supported Office Sought: ☒ House State: IN
SUSAN MRS. BROOKS ☐ Senate District: 05
☐ PresidentialAggregate General Election
Expenditure for this Candidate ► 1450.04

Transaction ID : SF.17678

Purpose of Expenditure
Volunteer Voter ID Phone
Bank MinutesCategory/
Type

Date

M M / D D / Y Y Y Y Y Y
11 09 2012

Amount

495.20

Full Name (Last, First, Middle Initial) of Each Payee

Airnet

Mailing Address PO Box 11181

City State Zip Code
Chattanooga TN 37401Name of Federal Candidate Supported Office Sought: ☒ House State: IN
RICHARD E MOURDOCK ☐ Senate District: 00
☐ PresidentialAggregate General Election
Expenditure for this Candidate ► 19217.94

Transaction ID : SF.17693

Purpose of Expenditure
Volunteer Voter ID Phone
Bank MinutesCategory/
Type

Date

M M / D D / Y Y Y Y Y Y
11 20 2012

Amount

2513.64

SUBTOTAL of Expenditures This Page (optional)..... ►

3471.61

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

SCHEDULE F (FEC Form 3X)
**ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 135 OF 182

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) INDIANA REPUBLICAN STATE COMMITTEE, INC.			
Has your committee been designated to make coordinated expenditures by a political party committee? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, name the designating committee:		Full Name of Subordinate Committee Mailing Address City _____ State _____ ZIP Code _____	

Full Name (Last, First, Middle Initial) of Each Payee Airnet		Purpose of Expenditure Volunteer Voter ID Phone Bank Minutes		Category/ Type
Mailing Address PO Box 11181		Date MM / DD / YYYY 11 / 20 / 2012		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">274.53</div>
City _____ State TN Zip Code 37401				
Name of Federal Candidate Supported TODD CHRISTOPHER YOUNG	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: IN District: 09		
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; padding: 2px; display: inline-block;">2594.69</div> Transaction ID : SF.17694				

Full Name (Last, First, Middle Initial) of Each Payee Airnet		Purpose of Expenditure Volunteer Voter ID Phone Bank Minutes		Category/ Type
Mailing Address PO Box 11181		Date MM / DD / YYYY 11 / 20 / 2012		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">260.95</div>
City _____ State TN Zip Code 37401				
Name of Federal Candidate Supported MARLIN A STUTZMAN	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: IN District: 03		
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; padding: 2px; display: inline-block;">1954.24</div> Transaction ID : SF.17695				

Full Name (Last, First, Middle Initial) of Each Payee Airnet		Purpose of Expenditure Volunteer Voter ID Phone Bank Minutes		Category/ Type
Mailing Address PO Box 11181		Date MM / DD / YYYY 11 / 20 / 2012		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">365.40</div>
City _____ State TN Zip Code 37401				
Name of Federal Candidate Supported THEODORE EDWARD ROKITA	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: IN District: 04		
Aggregate General Election Expenditure for this Candidate ▶ <div style="border: 1px solid black; padding: 2px; display: inline-block;">2702.59</div> Transaction ID : SF.17696				

SUBTOTAL of Expenditures This Page (optional)..... ▶	900.88
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE F (FEC Form 3X)
**ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 136 OF 182

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Has your committee been designated to make coordinated expenditures by a political party committee?

☐ YES ☒ NO

If YES, name the designating committee:

Full Name of Subordinate Committee

Mailing Address

City

State

ZIP Code

Full Name (Last, First, Middle Initial) of Each Payee

Airnet

Mailing Address PO Box 11181

City

Chattanooga

State

TN

Zip Code

37401Name of Federal Candidate Supported
LARRY D BUCSHON

Office Sought:

☒ House☐ Senate☐ PresidentialState: **IN**District: **08**

Aggregate General Election

Expenditure for this Candidate ▶

2565.07**Transaction ID : SF.17697**Purpose of Expenditure
Volunteer Voter ID Phone
Bank MinutesCategory/
Type

Date

11**20****2012**

Amount

327.80

Full Name (Last, First, Middle Initial) of Each Payee

Airnet

Mailing Address PO Box 11181

City

Chattanooga

State

TN

Zip Code

37401Name of Federal Candidate Supported
JACKIE (SWIHART) WALORSKI

Office Sought:

☒ House☐ Senate☐ PresidentialState: **IN**District: **02**

Aggregate General Election

Expenditure for this Candidate ▶

4220.48**Transaction ID : SF.17698**Purpose of Expenditure
Volunteer Voter ID Phone
Bank MinutesCategory/
Type

Date

11**20****2012**

Amount

702.61

Full Name (Last, First, Middle Initial) of Each Payee

Airnet

Mailing Address PO Box 11181

City

Chattanooga

State

TN

Zip Code

37401Name of Federal Candidate Supported
JOEL JEFFREY PHELPS

Office Sought:

☒ House☐ Senate☐ PresidentialState: **IN**District: **01**

Aggregate General Election

Expenditure for this Candidate ▶

2123.05**Transaction ID : SF.17699**Purpose of Expenditure
Volunteer Voter ID Phone
Bank MinutesCategory/
Type

Date

11**20****2012**

Amount

247.91**SUBTOTAL** of Expenditures This Page (optional)..... ▶**1278.32****TOTAL** This Period (last page this line number only)..... ▶

SCHEDULE F (FEC Form 3X)

**ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 137 OF 182

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

Has your committee been designated to make
coordinated expenditures by a political party committee?

☐ YES ☒ NO

If YES, name the designating committee:

Full Name of Subordinate Committee

Mailing Address

City

State

ZIP Code

Full Name (Last, First, Middle Initial) of Each Payee

Airnet

Mailing Address PO Box 11181

City

State

Zip Code

Chattanooga

TN

37401

Name of Federal Candidate Supported
SUSAN MRS. BROOKS

Office Sought:

☒ House

State: IN

☐ Senate

District: 05

☐ Presidential

Aggregate General Election

Expenditure for this Candidate ►

1784.48

Transaction ID : SF.17700

Purpose of Expenditure
Volunteer Voter ID Phone
Bank MinutesCategory/
Type

Date

MM / DD / YYYY
11 / 20 / 2012

Amount

334.44

Full Name (Last, First, Middle Initial) of Each Payee

Midwest Communications Group, LLC

Mailing Address PO Box 441

City

State

Zip Code

Franklin

IN

46131

Name of Federal Candidate Supported
ALLEN LUCAS MESSER

Office Sought:

☒ House

State: IN

☐ Senate

District: 06

☐ Presidential

Aggregate General Election

Expenditure for this Candidate ►

20033.84

Transaction ID : SF.17434

Purpose of Expenditure
GOTV Mail & PostageCategory/
Type

Date

MM / DD / YYYY
11 / 06 / 2012

Amount

19397.17

Full Name (Last, First, Middle Initial) of Each Payee

Mailing Address

City

State

Zip Code

Name of Federal Candidate Supported

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☐ Presidential

Aggregate General Election

Expenditure for this Candidate ►

Purpose of Expenditure

Category/
Type

Date

MM / DD / YYYY

Amount

SUBTOTAL of Expenditures This Page (optional)..... ►

19731.61

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

33520.49

SCHEDULE H2 (FEC Form 3X)**ALLOCATION RATIOS**

PAGE 138 OF 182

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.

Methods of allocation:

- I. FUNDRAISING activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity. **For PACs Only:** Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

ACTIVITY OR EVENT IDENTIFIER 2012 Fall Dinner (10/29/2012) ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported Transaction ID : H2.17483	FEDERAL % <div>45.00 %</div>	NONFEDERAL % <div>55.00 %</div>
ACTIVITY OR EVENT IDENTIFIER 2012 Fall Dinner In-Kinds (10/29/2012) ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported Transaction ID : H2.17485	FEDERAL % <div>45.00 %</div>	NONFEDERAL % <div>55.00 %</div>
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % <div></div>	NONFEDERAL % <div></div>
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % <div></div>	NONFEDERAL % <div></div>
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % <div></div>	NONFEDERAL % <div></div>
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % <div></div>	NONFEDERAL % <div></div>

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 139 OF 182

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)
 INDIANA REPUBLICAN STATE COMMITTEE, INC.

NAME OF ACCOUNT

Indiana Republican Party State Fund

DATE OF RECEIPT

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

TOTAL AMOUNT TRANSFERRED

11067.70

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

11067.70

Transaction ID : H3.17464

ii) Generic Voter Drive

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a)

b)

c) Total Amount Transferred For Direct Fundraising

v) Direct Candidate Support (List Activity or Event Identifier)

a)

b)

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC)

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred).....

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: H3

Transaction ID : H3.17464

This is the payment for the overhead for the dates 9/1/12 - 9/30/12 less \$20,000.00 of September overhead which was paid on October 5, 2012.

Form/Schedule:

Transaction ID:

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 141 OF 182

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)
 INDIANA REPUBLICAN STATE COMMITTEE, INC.

NAME OF ACCOUNT

Indiana Republican Party State Fund

DATE OF RECEIPT

M M / D D / Y Y Y Y Y
 10 / 26 / 2012

TOTAL AMOUNT TRANSFERRED

18585.62

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

18585.62

Transaction ID : H3.17465

ii) Generic Voter Drive

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a)

b)

c) Total Amount Transferred For Direct Fundraising

v) Direct Candidate Support (List Activity or Event Identifier)

a)

b)

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC)

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred).....

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB
.

Form/Schedule: H3
Transaction ID : H3.17465

This is the payment for the overhead for the dates 10/1/12 - 10/17/12.

Form/Schedule:
Transaction ID:

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 143 OF 182

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)
 INDIANA REPUBLICAN STATE COMMITTEE, INC.

NAME OF ACCOUNT

Indiana Republican Party State Fund

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
10			26			2012			

TOTAL AMOUNT TRANSFERRED

6251.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

0.00

Transaction ID : H3.17701

ii) Generic Voter Drive

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a) 2012 Fall Dinner In-Kinds (10/29/2012)

6251.00

Transaction ID : H3.17701.0

b)

c) Total Amount Transferred For Direct Fundraising

6251.00

v) Direct Candidate Support (List Activity or Event Identifier)

a)

b)

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC)

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

29653.32

TOTAL This Period (Generic Voter Drive)

0.00

TOTAL This Period (Exempt Activities)

0.00

TOTAL This Period (Direct Fundraising)

6251.00

TOTAL This Period (Direct Candidate Support)

0.00

TOTAL This Period (Public Communications Referring Only to Party)

0.00

TOTAL This Period (Total Amount Transferred).....

35904.32

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 144 OF 182

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Ben Parsons			Transaction ID : H4.17369			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 342 W Lusher Ave								
City Elkhart		State IN		Zip Code 46517				
Purpose of Disbursement: Postage & Supplies Reimbursement				Category/ Type		Allocated Activity or Event Year-To-Date 495578.54		
Activity or Event Identifier: Administrative						Date <input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2012"/>		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
<input type="text" value="10.79"/>				<input type="text" value="19.18"/>				<input type="text" value="29.97"/>

B. Full Name (Last, First, Middle Initial) Pete Seat			Transaction ID : H4.17371			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2643 Autumn Dr.								
City Crown Point		State IN		Zip Code 46307				
Purpose of Disbursement: Mileage Reimbursement				Category/ Type		Allocated Activity or Event Year-To-Date 495649.94		
Activity or Event Identifier: Administrative						Date <input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2012"/>		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
<input type="text" value="25.70"/>				<input type="text" value="45.70"/>				<input type="text" value="71.40"/>

C. Full Name (Last, First, Middle Initial) Stacey Shafer			Transaction ID : H4.17374			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 16364 Madison Rd								
City South Bend		State IN		Zip Code 46614				
Purpose of Disbursement: Supplies Reimbursement				Category/ Type		Allocated Activity or Event Year-To-Date 495678.41		
Activity or Event Identifier: Administrative						Date <input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2012"/>		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
<input type="text" value="10.25"/>				<input type="text" value="18.22"/>				<input type="text" value="28.47"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="46.74"/>		<input type="text" value="83.10"/>		<input type="text" value="129.84"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<input type="text"/>		<input type="text"/>		<input type="text"/>

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 145 OF 182

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Jenna Knepper			Transaction ID : H4.17381			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 970 University Blvd. Apt B								
City Indianapolis	State IN	Zip Code 46202				Allocated Activity or Event Year-To-Date 495736.41		
Purpose of Disbursement: Parking Reimbursement						Date <input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2012"/>		
Activity or Event Identifier: Administrative			Category/ Type					
FEDERAL SHARE			+			NONFEDERAL SHARE		
20.88						=		
			37.12			TOTAL AMOUNT		
						58.00		

B. Full Name (Last, First, Middle Initial) United States Postal Service			Transaction ID : H4.17487			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Main Office Window 125 W. South St								
City Indianapolis	State IN	Zip Code 46206				Allocated Activity or Event Year-To-Date 495736.41		
Purpose of Disbursement: Postage Expense - Paid by B. Parsons						Date <input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2012"/>		
Activity or Event Identifier: Administrative			Category/ Type					
[MEMO ITEM]								
FEDERAL SHARE			+			NONFEDERAL SHARE		
2.84						=		
			5.04			TOTAL AMOUNT		
						7.88		

C. Full Name (Last, First, Middle Initial) Save A Lot Stores			Transaction ID : H4.17488			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1708 Nappanee Street								
City Elkhart	State IN	Zip Code 46512				Allocated Activity or Event Year-To-Date 495736.41		
Purpose of Disbursement: Office Supplies - Paid by B. Parsons						Date <input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2012"/>		
Activity or Event Identifier: Administrative			Category/ Type					
[MEMO ITEM]								
FEDERAL SHARE			+			NONFEDERAL SHARE		
7.95						=		
			14.14			TOTAL AMOUNT		
						22.09		

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.88		37.12		58.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 146 OF 182

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) CVS Pharmacy		Transaction ID : H4.17493		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 801 N 1st Ave.					
City Evansville	State IN	Zip Code 47710			
Purpose of Disbursement: Office Supplies - Paid by S. Shafer				Allocated Activity or Event Year-To-Date 495736.41	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2012"/>	
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.25			18.22		28.47

B. Full Name (Last, First, Middle Initial) 121 E Maryland, LLC		Transaction ID : H4.17499		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 121 E. Maryland St.					
City Indianapolis	State IN	Zip Code 46204			
Purpose of Disbursement: Parking Expense - Paid by J. Knepper				Allocated Activity or Event Year-To-Date 495736.41	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2012"/>	
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.88			37.12		58.00

C. Full Name (Last, First, Middle Initial) Insight Communications		Transaction ID : H4.17424		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2856 Cathy Lane					
City Jasper	State IN	Zip Code 47546			
Purpose of Disbursement: Internet Expense				Allocated Activity or Event Year-To-Date 495916.41	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2012"/>	
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
64.80			115.20		180.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
64.80		115.20		180.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) WOW! Business Solutions		Transaction ID : H4.17425		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 630742					
City Cincinnati	State OH	Zip Code 45263			
Purpose of Disbursement: Internet Expense				Allocated Activity or Event Year-To-Date 496019.41	
Activity or Event Identifier: Administrative		Category/ Type		Date 10 / 19 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
37.08			65.92		103.00

B. Full Name (Last, First, Middle Initial) Ikon Office Solution		Transaction ID : H4.17430		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 810 Gears Road					
City Houston	State TX	Zip Code 77067			
Purpose of Disbursement: Copier Rental & Copies				Allocated Activity or Event Year-To-Date 496732.64	
Activity or Event Identifier: Administrative		Category/ Type		Date 10 / 19 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
256.76			456.47		713.23

C. Full Name (Last, First, Middle Initial) DAN COATS FOR INDIANA		Transaction ID : H4.17441		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 301141					
City INDIANAPOLIS	State IN	Zip Code 46230			
Purpose of Disbursement: July Software License Reimb. - Normal & Usual Charges Assessed				Allocated Activity or Event Year-To-Date 496607.64	
Activity or Event Identifier: Administrative		Category/ Type		Date 10 / 24 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
-45.00			-80.00		-125.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
248.84		442.39		691.23

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) The Conference Group LLC			Transaction ID : H4.17388			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 254 Chapman Rd, Suite 200								
City Newark	State DE	Zip Code 19702						
Purpose of Disbursement: Conference Calls						Allocated Activity or Event Year-To-Date 496978.26		
Activity or Event Identifier: Administrative			Category/ Type			Date 10 / 26 / 2012		
FEDERAL SHARE			+	NONFEDERAL SHARE		=	TOTAL AMOUNT	
133.42				237.20			370.62	

B. Full Name (Last, First, Middle Initial) Bright House Network			Transaction ID : H4.17389			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 741855								
City Cincinnati	State OH	Zip Code 45274						
Purpose of Disbursement: Cable & Internet Expense						Allocated Activity or Event Year-To-Date 497298.81		
Activity or Event Identifier: Administrative			Category/ Type			Date 10 / 26 / 2012		
FEDERAL SHARE			+	NONFEDERAL SHARE		=	TOTAL AMOUNT	
115.40				205.15			320.55	

C. Full Name (Last, First, Middle Initial) Comcast			Transaction ID : H4.17390			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 11988 Exit Five Parkway								
City Fishers	State IN	Zip Code 46038						
Purpose of Disbursement: Internet Expense						Allocated Activity or Event Year-To-Date 497528.61		
Activity or Event Identifier: Administrative			Category/ Type			Date 10 / 26 / 2012		
FEDERAL SHARE			+	NONFEDERAL SHARE		=	TOTAL AMOUNT	
82.73				147.07			229.80	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
331.55		589.42		920.97

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) AT&T Indiana			Transaction ID : H4.17412			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 240 North Meridian Street, Room 18								
City Indianapolis		State IN		Zip Code 46204				
Purpose of Disbursement: Security System Phone Line						Allocated Activity or Event Year-To-Date <div>500039.56</div>		
Activity or Event Identifier: Administrative								
FEDERAL SHARE			+			NONFEDERAL SHARE		
<div>29.57</div>						<div>52.57</div>		
			=			TOTAL AMOUNT		
<div></div>						<div>82.14</div>		

B. Full Name (Last, First, Middle Initial) SaveltNow			Transaction ID : H4.17415			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2340 Reliable Parkway								
City Chicago		State IL		Zip Code 60686				
Purpose of Disbursement: Office Supplies						Allocated Activity or Event Year-To-Date <div>500095.87</div>		
Activity or Event Identifier: Administrative								
FEDERAL SHARE			+			NONFEDERAL SHARE		
<div>20.27</div>						<div>36.04</div>		
			=			TOTAL AMOUNT		
<div></div>						<div>56.31</div>		

C. Full Name (Last, First, Middle Initial) Standard Coffee Service Co.			Transaction ID : H4.17416			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 36534								
City Indianapolis		State IN		Zip Code 46236				
Purpose of Disbursement: Coffee Supplies						Allocated Activity or Event Year-To-Date <div>500173.23</div>		
Activity or Event Identifier: Administrative								
FEDERAL SHARE			+			NONFEDERAL SHARE		
<div>27.85</div>						<div>49.51</div>		
			=			TOTAL AMOUNT		
<div></div>						<div>77.36</div>		

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div>77.69</div>		<div>138.12</div>		<div>215.81</div>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<div></div>		<div></div>		<div></div>

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) U.S. Postmaster-Meridian			Transaction ID : H4.17417			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 456 N. Meridian St.								
City Indianapolis		State IN		Zip Code 46204				
Purpose of Disbursement: BRE Postage				Category/ Type		Allocated Activity or Event Year-To-Date 500673.23		
Activity or Event Identifier: Administrative						Date <input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
<input type="text" value="180.00"/>				<input type="text" value="320.00"/>				<input type="text" value="500.00"/>

B. Full Name (Last, First, Middle Initial) CODA Computer Services Inc.			Transaction ID : H4.17418			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 212 W 10th Street, Suite B470								
City Indianapolis		State IN		Zip Code 46202				
Purpose of Disbursement: Technology Services				Category/ Type		Allocated Activity or Event Year-To-Date 503315.73		
Activity or Event Identifier: Administrative						Date <input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
<input type="text" value="951.30"/>				<input type="text" value="1691.20"/>				<input type="text" value="2642.50"/>

C. Full Name (Last, First, Middle Initial) South of Chicago Pizza			Transaction ID : H4.17511			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 619 Virginia Ave								
City Indianapolis		State IN		Zip Code 46203				
Purpose of Disbursement: Lunch for State Committee				Category/ Type		Allocated Activity or Event Year-To-Date 503315.73		
Activity or Event Identifier: Administrative						Date <input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
<input type="text" value="48.94"/>				<input type="text" value="87.01"/>				<input type="text" value="135.95"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="1131.30"/>		<input type="text" value="2011.20"/>		<input type="text" value="3142.50"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<input type="text"/>		<input type="text"/>		<input type="text"/>

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Bardach Awards		Transaction ID : H4.17513		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 910 Broad Ripple Ave.					
City Indianapolis	State IN	Zip Code 46220			
Purpose of Disbursement: Staff Badge				Allocated Activity or Event Year-To-Date 503315.73	
Activity or Event Identifier: Administrative		Category/ Type		Date 10 / 26 / 2012	
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.47			6.16		9.63

B. Full Name (Last, First, Middle Initial) FedEx - Tennessee		Transaction ID : H4.17514		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 1140					
City Memphis	State TN	Zip Code 38101			
Purpose of Disbursement: Shipping Expense				Allocated Activity or Event Year-To-Date 503315.73	
Activity or Event Identifier: Administrative		Category/ Type		Date 10 / 26 / 2012	
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
58.51			104.02		162.53

C. Full Name (Last, First, Middle Initial) United States Postal Service		Transaction ID : H4.17515		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Main Office Window 125 W. South St					
City Indianapolis	State IN	Zip Code 46206			
Purpose of Disbursement: Postage Expense				Allocated Activity or Event Year-To-Date 503315.73	
Activity or Event Identifier: Administrative		Category/ Type		Date 10 / 26 / 2012	
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
396.00			704.00		1100.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Hertz Rent A Car			Transaction ID : H4.17516			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4100 George J Bean Parkway								
City Tampa		State FL		Zip Code 33607				
Purpose of Disbursement: Rental Car Expense				Category/ Type		Allocated Activity or Event Year-To-Date 503315.73		
Activity or Event Identifier: Administrative [MEMO ITEM]						Date <input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
36.24				64.42				100.66

B. Full Name (Last, First, Middle Initial) Stamps.com			Transaction ID : H4.17517			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 12959 Coral Tree Place								
City Los Angeles		State CA		Zip Code 90066				
Purpose of Disbursement: Postage Software				Category/ Type		Allocated Activity or Event Year-To-Date 503315.73		
Activity or Event Identifier: Administrative [MEMO ITEM]						Date <input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
6.48				11.51				17.99

C. Full Name (Last, First, Middle Initial) Citrix Systems Inc.			Transaction ID : H4.17518			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 6500 Hollister Ave.								
City Goleta		State CA		Zip Code 93117				
Purpose of Disbursement: Monthly Subscription				Category/ Type		Allocated Activity or Event Year-To-Date 503315.73		
Activity or Event Identifier: Administrative [MEMO ITEM]						Date <input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
17.64				31.36				49.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) AT&T Wireless		Transaction ID : H4.17519		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 30024					
City College Station	State TX	Zip Code 77842			
Purpose of Disbursement: Internet Expense				Allocated Activity or Event Year-To-Date 503315.73	
Activity or Event Identifier: Administrative [MEMO ITEM]		Category/ Type		Date 10 / 26 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
9.00			16.00		25.00

B. Full Name (Last, First, Middle Initial) Old National Bancorp		Transaction ID : H4.17431		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 718					
City Evansville	State IN	Zip Code 47705			
Purpose of Disbursement: Bank Fees				Allocated Activity or Event Year-To-Date 503422.73	
Activity or Event Identifier: Administrative		Category/ Type		Date 10 / 31 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
38.52			68.48		107.00

C. Full Name (Last, First, Middle Initial) Indiana Business Bank		Transaction ID : H4.17432		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 250 E. 96th St., Suite 100					
City Indianapolis	State IN	Zip Code 46240			
Purpose of Disbursement: Bank Fees				Allocated Activity or Event Year-To-Date 503733.68	
Activity or Event Identifier: Administrative		Category/ Type		Date 10 / 31 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
111.94			199.01		310.95

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
150.46		267.49		417.95

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Marina R. Nicholson			Transaction ID : H4.17370			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3242 E Carol Ln.								
City Mooreville		State IN		Zip Code 46158				
Purpose of Disbursement: Mileage Reimbursement				Category/ Type		Allocated Activity or Event Year-To-Date 503805.08		
Activity or Event Identifier: Administrative						Date <input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>		
FEDERAL SHARE			+			NONFEDERAL SHARE		
25.70						45.70		
			=			TOTAL AMOUNT		
						71.40		

B. Full Name (Last, First, Middle Initial) Ben Parsons			Transaction ID : H4.17372			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 342 W Lusher Ave								
City Elkhart		State IN		Zip Code 46517				
Purpose of Disbursement: Postage & Supplies Reimbursement				Category/ Type		Allocated Activity or Event Year-To-Date 503842.89		
Activity or Event Identifier: Administrative						Date <input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>		
FEDERAL SHARE			+			NONFEDERAL SHARE		
13.61						24.20		
			=			TOTAL AMOUNT		
						37.81		

C. Full Name (Last, First, Middle Initial) Tracy R. Smith			Transaction ID : H4.17373			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3301 Lincoln Hill Rd.								
City Martinsville		State IN		Zip Code 46151				
Purpose of Disbursement: Mileage & Kitchen Supplies Reimbursement				Category/ Type		Allocated Activity or Event Year-To-Date 503919.30		
Activity or Event Identifier: Administrative						Date <input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>		
FEDERAL SHARE			+			NONFEDERAL SHARE		
27.51						48.90		
			=			TOTAL AMOUNT		
						76.41		

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
66.82		118.80		185.62

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Pete Seat			Transaction ID : H4.17375			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2643 Autumn Dr.								
City Crown Point	State IN	Zip Code 46307				Allocated Activity or Event Year-To-Date 504044.10		
Purpose of Disbursement: Mileage Reimbursement						Date <input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>		
Activity or Event Identifier: Administrative			Category/ Type					
FEDERAL SHARE			+			NONFEDERAL SHARE		
44.93						=		
			79.87			TOTAL AMOUNT		
						124.80		

B. Full Name (Last, First, Middle Initial) Stacey Shafer			Transaction ID : H4.17376			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 16364 Madison Rd								
City South Bend	State IN	Zip Code 46614				Allocated Activity or Event Year-To-Date 504059.11		
Purpose of Disbursement: Supplies Reimbursement						Date <input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>		
Activity or Event Identifier: Administrative			Category/ Type					
FEDERAL SHARE			+			NONFEDERAL SHARE		
5.40						=		
			9.61			TOTAL AMOUNT		
						15.01		

C. Full Name (Last, First, Middle Initial) Ross M Teare			Transaction ID : H4.17377			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1418 Olde Briar In								
City Carmel	State IN	Zip Code 46032				Allocated Activity or Event Year-To-Date 504077.41		
Purpose of Disbursement: Mileage Reimbursement						Date <input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>		
Activity or Event Identifier: Administrative			Category/ Type					
FEDERAL SHARE			+			NONFEDERAL SHARE		
6.59						=		
			11.71			TOTAL AMOUNT		
						18.30		

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
56.92		101.19		158.11

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Catherine M. Watkins			Transaction ID : H4.17378			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 669 White Ash Tr.								
City Mooresville		State IN		Zip Code 46158				
Purpose of Disbursement: Cards & Catering Reimbursement						Allocated Activity or Event Year-To-Date 504104.16		
Activity or Event Identifier: Administrative								
						Date <input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>		
FEDERAL SHARE			+			NONFEDERAL SHARE		
9.63						26.75		

B. Full Name (Last, First, Middle Initial) Jenna Knepper			Transaction ID : H4.17383			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 970 University Blvd. Apt B								
City Indianapolis		State IN		Zip Code 46202				
Purpose of Disbursement: Parking Reimbursement						Allocated Activity or Event Year-To-Date 504126.16		
Activity or Event Identifier: Administrative								
						Date <input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>		
FEDERAL SHARE			+			NONFEDERAL SHARE		
7.92						22.00		

C. Full Name (Last, First, Middle Initial) Troy A. Montigney			Transaction ID : H4.17384			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2232 Arden Place								
City Greenwood		State IN		Zip Code 46143				
Purpose of Disbursement: Supplies Reimbursement						Allocated Activity or Event Year-To-Date 504138.76		
Activity or Event Identifier: Administrative								
						Date <input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>		
FEDERAL SHARE			+			NONFEDERAL SHARE		
4.54						12.60		

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.09		39.26		61.35

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) John Heldreth		Transaction ID : H4.17385		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 7140 N 900 E				Allocated Activity or Event Year-To-Date 504150.46	
City Mentone	State IN	Zip Code 46539		Date <input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>	
Purpose of Disbursement: Mileage Reimbursement					
Activity or Event Identifier: Administrative		Category/ Type			
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.21			7.49		11.70

B. Full Name (Last, First, Middle Initial) Abigail Anders		Transaction ID : H4.17387		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 10654 Springston Ct				Allocated Activity or Event Year-To-Date 504177.46	
City Fishers	State IN	Zip Code 46037		Date <input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>	
Purpose of Disbursement: Mileage Reimbursement					
Activity or Event Identifier: Administrative		Category/ Type			
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.72			17.28		27.00

C. Full Name (Last, First, Middle Initial) Bodner Opera House, LLC		Transaction ID : H4.17413		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address One N. Meridian St. Suite 300				Allocated Activity or Event Year-To-Date 524184.14	
City Indianapolis	State IN	Zip Code 46204		Date <input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>	
Purpose of Disbursement: November Rent					
Activity or Event Identifier: Administrative		Category/ Type			
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7202.40			12804.28		20006.68

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7216.33		12829.05		20045.38

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Infinisource, Inc.			Transaction ID : H4.17414			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 15 E Washington Street								
City Coldwater		State MI		Zip Code 49036				
Purpose of Disbursement: Monthly Cobra Compliance Consult Fees						Allocated Activity or Event Year-To-Date <div>524234.14</div>		
Activity or Event Identifier: Administrative								
FEDERAL SHARE			+			NONFEDERAL SHARE		
<div>18.00</div>						<div>32.00</div>		
			=			TOTAL AMOUNT		
<div></div>						<div>50.00</div>		

B. Full Name (Last, First, Middle Initial) Comcast			Transaction ID : H4.17419			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 11988 Exit Five Parkway								
City Fishers		State IN		Zip Code 46038				
Purpose of Disbursement: Internet Expense						Allocated Activity or Event Year-To-Date <div>524356.53</div>		
Activity or Event Identifier: Administrative								
FEDERAL SHARE			+			NONFEDERAL SHARE		
<div>44.06</div>						<div>78.33</div>		
			=			TOTAL AMOUNT		
<div></div>						<div>122.39</div>		

C. Full Name (Last, First, Middle Initial) Airnet			Transaction ID : H4.17420			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 11181								
City Chattanooga		State TN		Zip Code 37401				
Purpose of Disbursement: Monthly Equipment Expense						Allocated Activity or Event Year-To-Date <div>526594.43</div>		
Activity or Event Identifier: Administrative								
FEDERAL SHARE			+			NONFEDERAL SHARE		
<div>805.64</div>						<div>1432.26</div>		
			=			TOTAL AMOUNT		
<div></div>						<div>2237.90</div>		

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div>867.70</div>		<div>1542.59</div>		<div>2410.29</div>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<div></div>		<div></div>		<div></div>

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Bright House Network		Transaction ID : H4.17421		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 741855					
City Cincinnati	State OH	Zip Code 45274			
Purpose of Disbursement: Internet Expense				Allocated Activity or Event Year-To-Date 526754.38	
Activity or Event Identifier: Administrative		Category/ Type		Date 11 / 01 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
57.58			102.37		159.95

B. Full Name (Last, First, Middle Initial) SaveltNow		Transaction ID : H4.17422		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2340 Reliable Parkway					
City Chicago	State IL	Zip Code 60686			
Purpose of Disbursement: Office Supplies				Allocated Activity or Event Year-To-Date 526825.94	
Activity or Event Identifier: Administrative		Category/ Type		Date 11 / 01 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.76			45.80		71.56

C. Full Name (Last, First, Middle Initial) United States Postal Service		Transaction ID : H4.17520		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Main Office Window 125 W. South St					
City Indianapolis	State IN	Zip Code 46206			
Purpose of Disbursement: Postage Expense - Paid by B. Parsons				Allocated Activity or Event Year-To-Date 526825.94	
Activity or Event Identifier: Administrative		Category/ Type		Date 11 / 01 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.03			7.17		11.20

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
83.34		148.17		231.51

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Kroger			Transaction ID : H4.17521			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 524 E 16th Street								
City Indianapolis	State IN	Zip Code 46202				Allocated Activity or Event Year-To-Date 526825.94		
Purpose of Disbursement: Office Supplies - Paid by B. Parsons						Date <input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>		
Activity or Event Identifier: Administrative [MEMO ITEM]			Category/ Type					
FEDERAL SHARE			+	NONFEDERAL SHARE		=	TOTAL AMOUNT	
4.70				8.36			13.06	

B. Full Name (Last, First, Middle Initial) Save A Lot Stores			Transaction ID : H4.17522			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1708 Nappanee Street								
City Elkhart	State IN	Zip Code 46512				Allocated Activity or Event Year-To-Date 526825.94		
Purpose of Disbursement: Office Supplies - Paid by B. Parsons						Date <input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>		
Activity or Event Identifier: Administrative [MEMO ITEM]			Category/ Type					
FEDERAL SHARE			+	NONFEDERAL SHARE		=	TOTAL AMOUNT	
4.88				8.67			13.55	

C. Full Name (Last, First, Middle Initial) Sam's Club			Transaction ID : H4.17525			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1101 Windhorst Way								
City Greenwood	State IN	Zip Code 46143				Allocated Activity or Event Year-To-Date 526825.94		
Purpose of Disbursement: Kitchen Supplies - Paid by T. Smith						Date <input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>		
Activity or Event Identifier: Administrative [MEMO ITEM]			Category/ Type					
FEDERAL SHARE			+	NONFEDERAL SHARE		=	TOTAL AMOUNT	
24.81				44.10			68.91	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) CVS Pharmacy			Transaction ID : H4.17526			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 801 N 1st Ave.								
City	State	Zip Code				Allocated Activity or Event Year-To-Date		
Evansville	IN	47710				526825.94		
Purpose of Disbursement: Office Supplies - Paid by S. Shafer						Date		
Activity or Event Identifier: Administrative			Category/ Type			M M / D D / Y Y Y Y Y Y 11 / 01 / 2012		
[MEMO ITEM]								
FEDERAL SHARE			+	NONFEDERAL SHARE		=	TOTAL AMOUNT	
5.40				9.61			15.01	

B. Full Name (Last, First, Middle Initial) Dunkin Donuts			Transaction ID : H4.17527			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 7015 Kentucky Ave.								
City	State	Zip Code				Allocated Activity or Event Year-To-Date		
Indianapolis	IN	46225				526825.94		
Purpose of Disbursement: Catering for Staff Birthday - Paid by C. Watkins						Date		
Activity or Event Identifier: Administrative			Category/ Type			M M / D D / Y Y Y Y Y Y 11 / 01 / 2012		
[MEMO ITEM]								
FEDERAL SHARE			+	NONFEDERAL SHARE		=	TOTAL AMOUNT	
4.64				8.24			12.88	

C. Full Name (Last, First, Middle Initial) Walgreens			Transaction ID : H4.17528			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1530 N Meridian Street								
City	State	Zip Code				Allocated Activity or Event Year-To-Date		
Indianapolis	IN	46202				526825.94		
Purpose of Disbursement: Birthday Cards - Paid by C. Watkins						Date		
Activity or Event Identifier: Administrative			Category/ Type			M M / D D / Y Y Y Y Y Y 11 / 01 / 2012		
[MEMO ITEM]								
FEDERAL SHARE			+	NONFEDERAL SHARE		=	TOTAL AMOUNT	
4.99				8.88			13.87	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Target		Transaction ID : H4.17538		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 895 S State Road 135				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Greenwood	State IN	Zip Code 46143		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Office Supplies - Paid by T. Montigny				Allocated Activity or Event Year-To-Date 526825.94	
Activity or Event Identifier: Administrative		Category/ Type		Date 11 / 01 / 2012	
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.54			8.06		12.60

B. Full Name (Last, First, Middle Initial) 121 E Maryland, LLC		Transaction ID : H4.17542		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 121 E. Maryland St.				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Indianapolis	State IN	Zip Code 46204		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Parking Expense - Paid by J. Knepper				Allocated Activity or Event Year-To-Date 526825.94	
Activity or Event Identifier: Administrative		Category/ Type		Date 11 / 01 / 2012	
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.92			14.08		22.00

C. Full Name (Last, First, Middle Initial) Marion County Treasurer		Transaction ID : H4.17607		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 200 E Washington Suite 1001				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Indianapolis	State IN	Zip Code 46204		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Fall Installment of Property Taxes				Allocated Activity or Event Year-To-Date 528090.16	
Activity or Event Identifier: Administrative		Category/ Type		Date 11 / 01 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
455.12			809.10		1264.22

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
455.12		809.10		1264.22

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) US Incubator, LLC			Transaction ID : H4.17399			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 815 John St. Suite 1								
City Evansville		State IN		Zip Code 47713				
Purpose of Disbursement: November Rent				Category/ Type		Allocated Activity or Event Year-To-Date 528910.16		
Activity or Event Identifier: Administrative						Date <input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>		
FEDERAL SHARE			+			NONFEDERAL SHARE		
295.20						524.80		
						=		
						TOTAL AMOUNT		
						820.00		

B. Full Name (Last, First, Middle Initial) Lincoln Heritage Council			Transaction ID : H4.17400			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 12001 Sycamore Station Place								
City Louisville		State KY		Zip Code 40299				
Purpose of Disbursement: November Rent				Category/ Type		Allocated Activity or Event Year-To-Date 529410.16		
Activity or Event Identifier: Administrative						Date <input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>		
FEDERAL SHARE			+			NONFEDERAL SHARE		
180.00						320.00		
						=		
						TOTAL AMOUNT		
						500.00		

C. Full Name (Last, First, Middle Initial) WALORSKI FOR CONGRESS INC			Transaction ID : H4.17402			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO BOX 954								
City MISHAWAKA		State IN		Zip Code 46546				
Purpose of Disbursement: November Rent - Normal & Usual Charges				Category/ Type		Allocated Activity or Event Year-To-Date 529993.16		
Activity or Event Identifier: Administrative						Date <input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>		
FEDERAL SHARE			+			NONFEDERAL SHARE		
209.88						373.12		
						=		
						TOTAL AMOUNT		
						583.00		

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
685.08		1217.92		1903.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Republic Waste Services, Inc.			Transaction ID : H4.17426			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 832 Lansdale Avenue								
City Indianapolis		State IN		Zip Code 46202				
Purpose of Disbursement: Recycling Expense				Category/ Type		Allocated Activity or Event Year-To-Date 530049.49		
Activity or Event Identifier: Administrative						Date <input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2012"/>		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
20.28				36.05				56.33

B. Full Name (Last, First, Middle Initial) Sharp Business Systems			Transaction ID : H4.17427			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 7330 E 86th Street, Suite 900								
City Indianapolis		State IN		Zip Code 46256				
Purpose of Disbursement: Copy Expense				Category/ Type		Allocated Activity or Event Year-To-Date 530401.40		
Activity or Event Identifier: Administrative						Date <input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2012"/>		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
126.69				225.22				351.91

C. Full Name (Last, First, Middle Initial) OneSource Water			Transaction ID : H4.17428			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1060 N Capitol Ave. Suite E310								
City Indianapolis		State IN		Zip Code 46204				
Purpose of Disbursement: Water Rental				Category/ Type		Allocated Activity or Event Year-To-Date 530476.30		
Activity or Event Identifier: Administrative						Date <input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2012"/>		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
26.96				47.94				74.90

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
173.93		309.21		483.14

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Comcast		Transaction ID : H4.17429		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 11988 Exit Five Parkway					
City Fishers	State IN	Zip Code 46038			
Purpose of Disbursement: Internet Expense				Allocated Activity or Event Year-To-Date 530598.20	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2012"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
43.88			78.02		121.90

B. Full Name (Last, First, Middle Initial) Jenna Knepper		Transaction ID : H4.17362		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 970 University Blvd. Apt B					
City Indianapolis	State IN	Zip Code 46202			
Purpose of Disbursement: Parking & Supplies Reimbursement				Allocated Activity or Event Year-To-Date 530641.64	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.64			27.80		43.44

C. Full Name (Last, First, Middle Initial) Ross M Teare		Transaction ID : H4.17363		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1418 Olde Briar In					
City Carmel	State IN	Zip Code 46032			
Purpose of Disbursement: Mileage Reimbursement				Allocated Activity or Event Year-To-Date 530653.64	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.32			7.68		12.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
63.84		113.50		177.34

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Stacey Shafer			Transaction ID : H4.17364			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 16364 Madison Rd								
City	State	Zip Code						
South Bend	IN	46614						
Purpose of Disbursement: Supplies Reimbursement						Allocated Activity or Event Year-To-Date 530667.30		
Activity or Event Identifier: Administrative			Category/ Type			Date <input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>		
FEDERAL SHARE			+	NONFEDERAL SHARE		=	TOTAL AMOUNT	
4.92				8.74			13.66	

B. Full Name (Last, First, Middle Initial) Abigail Anders			Transaction ID : H4.17365			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 10654 Springston Ct								
City	State	Zip Code						
Fishers	IN	46037						
Purpose of Disbursement: Postage Reimbursement						Allocated Activity or Event Year-To-Date 530762.20		
Activity or Event Identifier: Administrative			Category/ Type			Date <input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>		
FEDERAL SHARE			+	NONFEDERAL SHARE		=	TOTAL AMOUNT	
34.16				60.74			94.90	

C. Full Name (Last, First, Middle Initial) Trent Hagerty			Transaction ID : H4.17366			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1923 Jasmine Dr								
City	State	Zip Code						
Indianapolis	IN	46219						
Purpose of Disbursement: Shipping Reimbursement						Allocated Activity or Event Year-To-Date 530949.08		
Activity or Event Identifier: Administrative			Category/ Type			Date <input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>		
FEDERAL SHARE			+	NONFEDERAL SHARE		=	TOTAL AMOUNT	
67.28				119.60			186.88	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
106.36		189.08		295.44

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Jessie L. Beyrer			Transaction ID : H4.17367			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 219 Saint Charles Way								
City Whiteland	State IN	Zip Code 46184				Allocated Activity or Event Year-To-Date 530958.08		
Purpose of Disbursement: Mileage Reimbursement						Date <input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>		
Activity or Event Identifier: Administrative			Category/ Type					
FEDERAL SHARE			+	NONFEDERAL SHARE		=	TOTAL AMOUNT	
3.24				5.76			9.00	

B. Full Name (Last, First, Middle Initial) Ben Parsons			Transaction ID : H4.17368			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 342 W Lusher Ave								
City Elkhart	State IN	Zip Code 46517				Allocated Activity or Event Year-To-Date 530987.70		
Purpose of Disbursement: Postage & Supplies Reimbursement						Date <input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>		
Activity or Event Identifier: Administrative			Category/ Type					
FEDERAL SHARE			+	NONFEDERAL SHARE		=	TOTAL AMOUNT	
10.66				18.96			29.62	

C. Full Name (Last, First, Middle Initial) Crossroads Bank			Transaction ID : H4.17404			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 259								
City Wabash	State IN	Zip Code 46992				Allocated Activity or Event Year-To-Date 534056.70		
Purpose of Disbursement: Copier Rental						Date <input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>		
Activity or Event Identifier: Administrative			Category/ Type					
FEDERAL SHARE			+	NONFEDERAL SHARE		=	TOTAL AMOUNT	
1104.84				1964.16			3069.00	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1118.74		1988.88		3107.62

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Cardwell Do It Best		Transaction ID : H4.17557		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 3205 Madison Ave.					
City Indianapolis	State IN	Zip Code 46227			
Purpose of Disbursement: Office Supplies - Paid by J. Knepper				Allocated Activity or Event Year-To-Date 534056.70	
Activity or Event Identifier: Administrative [MEMO ITEM]		Category/ Type		Date 11 / 15 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.14			10.92		17.06

B. Full Name (Last, First, Middle Initial) Kmart		Transaction ID : H4.17559		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2715 Madison Ave.					
City Indianapolis	State IN	Zip Code 46225			
Purpose of Disbursement: Office Supplies - Paid by J. Knepper				Allocated Activity or Event Year-To-Date 534056.70	
Activity or Event Identifier: Administrative [MEMO ITEM]		Category/ Type		Date 11 / 15 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.07			5.46		8.53

C. Full Name (Last, First, Middle Initial) Aldi's		Transaction ID : H4.17561		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2955 S Madison Ave					
City Indianapolis	State IN	Zip Code 46225			
Purpose of Disbursement: Office Supplies - Paid by J. Knepper				Allocated Activity or Event Year-To-Date 534056.70	
Activity or Event Identifier: Administrative [MEMO ITEM]		Category/ Type		Date 11 / 15 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.75			3.10		4.85

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Merchants Garage		Transaction ID : H4.17563		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 31 South Meridian St.					
City Indianapolis	State IN	Zip Code 46204			
Purpose of Disbursement: Parking Expense - Paid by J. Knepper				Allocated Activity or Event Year-To-Date 534056.70	
Activity or Event Identifier: Administrative [MEMO ITEM]		Category/ Type		Date 11 / 15 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
4.68			8.32		13.00

B. Full Name (Last, First, Middle Initial) CVS Pharmacy		Transaction ID : H4.17570		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 801 N 1st Ave.					
City Evansville	State IN	Zip Code 47710			
Purpose of Disbursement: Office Supplies - Paid by S. Shafer				Allocated Activity or Event Year-To-Date 534056.70	
Activity or Event Identifier: Administrative [MEMO ITEM]		Category/ Type		Date 11 / 15 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
4.92			8.74		13.66

C. Full Name (Last, First, Middle Initial) United States Postal Service		Transaction ID : H4.17573		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Main Office Window 125 W. South St					
City Indianapolis	State IN	Zip Code 46206			
Purpose of Disbursement: Postage Expense - Paid by A. Anders				Allocated Activity or Event Year-To-Date 534056.70	
Activity or Event Identifier: Administrative [MEMO ITEM]		Category/ Type		Date 11 / 15 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
34.16			60.74		94.90

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) United States Postal Service			Transaction ID : H4.17576			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Main Office Window 125 W. South St								
City Indianapolis		State IN		Zip Code 46206				
Purpose of Disbursement: Shipping Expense - Paid by T. Hagerty						Allocated Activity or Event Year-To-Date 534056.70		
Activity or Event Identifier: Administrative [MEMO ITEM]								
FEDERAL SHARE			+			NONFEDERAL SHARE		
67.28						119.60		
			=			TOTAL AMOUNT		
						186.88		

B. Full Name (Last, First, Middle Initial) Save A Lot Stores			Transaction ID : H4.17577			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1708 Nappanee Street								
City Elkhart		State IN		Zip Code 46512				
Purpose of Disbursement: Office Supplies - Paid by B. Parsons						Allocated Activity or Event Year-To-Date 534056.70		
Activity or Event Identifier: Administrative [MEMO ITEM]								
FEDERAL SHARE			+			NONFEDERAL SHARE		
6.46						11.48		
			=			TOTAL AMOUNT		
						17.94		

C. Full Name (Last, First, Middle Initial) United States Postal Service			Transaction ID : H4.17578			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Main Office Window 125 W. South St								
City Indianapolis		State IN		Zip Code 46206				
Purpose of Disbursement: Postage Expense - Paid by B. Parsons						Allocated Activity or Event Year-To-Date 534056.70		
Activity or Event Identifier: Administrative [MEMO ITEM]								
FEDERAL SHARE			+			NONFEDERAL SHARE		
4.20						7.48		
			=			TOTAL AMOUNT		
						11.68		

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Chase Card Services		Transaction ID : H4.17398		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 94014					
City Palatine	State IL	Zip Code 60094			
Purpose of Disbursement: Credit Card: See Below				Allocated Activity or Event Year-To-Date 534705.16	
Activity or Event Identifier: Administrative		Category/ Type		Date 11 / 16 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
233.45			415.01		648.46

B. Full Name (Last, First, Middle Initial) AT&T Indiana		Transaction ID : H4.17405		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 240 North Meridian Street, Room 18					
City Indianapolis	State IN	Zip Code 46204			
Purpose of Disbursement: Internet Data Lines				Allocated Activity or Event Year-To-Date 534800.94	
Activity or Event Identifier: Administrative		Category/ Type		Date 11 / 16 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
34.48			61.30		95.78

C. Full Name (Last, First, Middle Initial) First Mile Technologies, Inc.		Transaction ID : H4.17406		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 750 Liberty Dr.					
City Westfield	State IN	Zip Code 46074			
Purpose of Disbursement: Monthly Phones & Internet Expense				Allocated Activity or Event Year-To-Date 535350.84	
Activity or Event Identifier: Administrative		Category/ Type		Date 11 / 16 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
197.96			351.94		549.90

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
465.89		828.25		1294.14

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Bright House Network			Transaction ID : H4.17407			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 741855								
City Cincinnati	State OH	Zip Code 45274				Allocated Activity or Event Year-To-Date 535510.79		
Purpose of Disbursement: Internet Expense						Date <input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2012"/>		
Activity or Event Identifier: Administrative			Category/ Type					
FEDERAL SHARE			+			NONFEDERAL SHARE		
57.58						=		
			102.37			TOTAL AMOUNT		
						159.95		

B. Full Name (Last, First, Middle Initial) DAN COATS FOR INDIANA			Transaction ID : H4.17442			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO BOX 301141								
City INDIANAPOLIS	State IN	Zip Code 46230				Allocated Activity or Event Year-To-Date 535385.79		
Purpose of Disbursement: October Software License Reimb. - Normal & Usual Charges Assessed						Date <input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2012"/>		
Activity or Event Identifier: Administrative			Category/ Type					
FEDERAL SHARE			+			NONFEDERAL SHARE		
-45.00						=		
			-80.00			TOTAL AMOUNT		
						-125.00		

C. Full Name (Last, First, Middle Initial) U.S. Postmaster-Meridian			Transaction ID : H4.17481			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 456 N. Meridian St.								
City Indianapolis	State IN	Zip Code 46204				Allocated Activity or Event Year-To-Date 535115.25		
Purpose of Disbursement: BRE Postage Reimbursement						Date <input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2012"/>		
Activity or Event Identifier: Administrative			Category/ Type					
FEDERAL SHARE			+			NONFEDERAL SHARE		
-97.39						=		
			-173.15			TOTAL AMOUNT		
						-270.54		

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
-84.81		-150.78		-235.59

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Indiana Secretary of State			Transaction ID : H4.17582			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 200 W Washington Street								
City Indianapolis	State IN	Zip Code 46204				Allocated Activity or Event Year-To-Date 535115.25		
Purpose of Disbursement: Business Filing Fee						Date <input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2012"/>		
Activity or Event Identifier: Administrative			Category/ Type					
[MEMO ITEM]								
FEDERAL SHARE			+			NONFEDERAL SHARE		
2.57						=		
			4.57			TOTAL AMOUNT		
						7.14		

B. Full Name (Last, First, Middle Initial) Bulbster			Transaction ID : H4.17584			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4142 SE 42nd Ave.								
City Portland	State OR	Zip Code 97206				Allocated Activity or Event Year-To-Date 535115.25		
Purpose of Disbursement: Office Supplies						Date <input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2012"/>		
Activity or Event Identifier: Administrative			Category/ Type					
[MEMO ITEM]								
FEDERAL SHARE			+			NONFEDERAL SHARE		
33.17						=		
			58.98			TOTAL AMOUNT		
						92.15		

C. Full Name (Last, First, Middle Initial) United States Postal Service			Transaction ID : H4.17586			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Main Office Window 125 W. South St								
City Indianapolis	State IN	Zip Code 46206				Allocated Activity or Event Year-To-Date 535115.25		
Purpose of Disbursement: Postage Expense						Date <input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2012"/>		
Activity or Event Identifier: Administrative			Category/ Type					
[MEMO ITEM]								
FEDERAL SHARE			+			NONFEDERAL SHARE		
144.00						=		
			256.00			TOTAL AMOUNT		
						400.00		

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Cafe Patachou		Transaction ID : H4.17589		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 8697 River Crossing Blvd					
City Indianapolis	State IN	Zip Code 46240			
Purpose of Disbursement: Meals Expense				Allocated Activity or Event Year-To-Date 535115.25	
Activity or Event Identifier: Administrative [MEMO ITEM]		Category/ Type		Date 11 / 16 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.23			25.29		39.52

B. Full Name (Last, First, Middle Initial) Paradise Cafe		Transaction ID : H4.17591		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 111 Monument Circle Suite 100					
City Indianapolis	State IN	Zip Code 46204			
Purpose of Disbursement: Cookies for Staff Birthday				Allocated Activity or Event Year-To-Date 535115.25	
Activity or Event Identifier: Administrative [MEMO ITEM]		Category/ Type		Date 11 / 16 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.36			11.30		17.66

C. Full Name (Last, First, Middle Initial) Stamps.com		Transaction ID : H4.17592		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 12959 Coral Tree Place					
City Los Angeles	State CA	Zip Code 90066			
Purpose of Disbursement: Postage Software				Allocated Activity or Event Year-To-Date 535115.25	
Activity or Event Identifier: Administrative [MEMO ITEM]		Category/ Type		Date 11 / 16 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.48			11.51		17.99

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Citrix Systems Inc.		Transaction ID : H4.17593		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 6500 Hollister Ave.					
City Goleta	State CA	Zip Code 93117			
Purpose of Disbursement: Monthly Subscription				Allocated Activity or Event Year-To-Date 535115.25	
Activity or Event Identifier: Administrative [MEMO ITEM]		Category/ Type		Date 11 / 16 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.64			31.36		49.00

B. Full Name (Last, First, Middle Initial) AT&T Wireless		Transaction ID : H4.17594		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 30024					
City College Station	State TX	Zip Code 77842			
Purpose of Disbursement: Internet Expense				Allocated Activity or Event Year-To-Date 535115.25	
Activity or Event Identifier: Administrative [MEMO ITEM]		Category/ Type		Date 11 / 16 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.00			16.00		25.00

C. Full Name (Last, First, Middle Initial) Standard Coffee Service Co.		Transaction ID : H4.17391		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 36534					
City Indianapolis	State IN	Zip Code 46236			
Purpose of Disbursement: Coffee Supplies				Allocated Activity or Event Year-To-Date 535229.61	
Activity or Event Identifier: Administrative		Category/ Type		Date 11 / 20 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
41.17			73.19		114.36

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
41.17		73.19		114.36

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Ikon Office Solution		Transaction ID : H4.17392		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 810 Gears Road					
City Houston	State TX	Zip Code 77067			
Purpose of Disbursement: Copier Rental				Allocated Activity or Event Year-To-Date 535361.50	
Activity or Event Identifier: Administrative		Category/ Type		Date 11 / 20 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
47.48			84.41		131.89

B. Full Name (Last, First, Middle Initial) Bright House Network		Transaction ID : H4.17393		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 741855					
City Cincinnati	State OH	Zip Code 45274			
Purpose of Disbursement: Cable & Internet Expense				Allocated Activity or Event Year-To-Date 535682.05	
Activity or Event Identifier: Administrative		Category/ Type		Date 11 / 20 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
115.40			205.15		320.55

C. Full Name (Last, First, Middle Initial) WOW! Business Solutions		Transaction ID : H4.17394		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 630742					
City Cincinnati	State OH	Zip Code 45263			
Purpose of Disbursement: Internet Expense				Allocated Activity or Event Year-To-Date 535785.05	
Activity or Event Identifier: Administrative		Category/ Type		Date 11 / 20 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.08			65.92		103.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
199.96		355.48		555.44

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Unisource		Transaction ID : H4.17395		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 14761-B					
City St. Louis	State MO	Zip Code 63160			
Purpose of Disbursement: Copier Paper				Allocated Activity or Event Year-To-Date 536652.82	
Activity or Event Identifier: Administrative		Category/ Type		Date 11 / 20 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
312.40			555.37		867.77

B. Full Name (Last, First, Middle Initial) The Conference Group LLC		Transaction ID : H4.17396		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 254 Chapman Rd, Suite 200					
City Newark	State DE	Zip Code 19702			
Purpose of Disbursement: Conference Calls				Allocated Activity or Event Year-To-Date 537373.56	
Activity or Event Identifier: Administrative		Category/ Type		Date 11 / 20 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
259.47			461.27		720.74

C. Full Name (Last, First, Middle Initial) Insight Communications		Transaction ID : H4.17397		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2856 Cathy Lane					
City Jasper	State IN	Zip Code 47546			
Purpose of Disbursement: Internet Expense				Allocated Activity or Event Year-To-Date 537534.06	
Activity or Event Identifier: Administrative		Category/ Type		Date 11 / 20 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
57.78			102.72		160.50

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
629.65		1119.36		1749.01

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Comcast		Transaction ID : H4.17403		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 11988 Exit Five Parkway					
City Fishers	State IN	Zip Code 46038			
Purpose of Disbursement: Internet Expense				Allocated Activity or Event Year-To-Date 537763.86	
Activity or Event Identifier: Administrative		Category/ Type		Date 11 / 20 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
82.73			147.07		229.80

B. Full Name (Last, First, Middle Initial) Chase Card Services		Transaction ID : H4.17597		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 94014					
City Palatine	State IL	Zip Code 60094			
Purpose of Disbursement: Credit Card: See Below				Allocated Activity or Event Year-To-Date 40010.77	
Activity or Event Identifier: 2012 Fall Dinner(10/29/2012)		Category/ Type		Date 11 / 16 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
68.21			83.36		151.57

C. Full Name (Last, First, Middle Initial) Fedex Office		Transaction ID : H4.17598		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 120 Monument Circle					
City Indianapolis	State IN	Zip Code 46204			
Purpose of Disbursement: State Party Event Centerpieces				Allocated Activity or Event Year-To-Date 40010.77	
Activity or Event Identifier: 2012 Fall Dinner(10/29/2012)		Category/ Type		Date 11 / 16 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
20.10			24.57		44.67

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
150.94		230.43		381.37

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Ritz Charles		Transaction ID : H4.17433		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 12156 N Meridian St.					
City Carmel	State IN	Zip Code 46032			
Purpose of Disbursement: State Party Event Catering				Allocated Activity or Event Year-To-Date 39859.20	
Activity or Event Identifier: 2012 Fall Dinner(10/29/2012)		Category/ Type		Date <input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2012"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
17486.64			22372.56		39859.20

B. Full Name (Last, First, Middle Initial) Steve's Flowers		Transaction ID : H4.17599		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 3150 E Thompson Rd					
City Indianapolis	State IN	Zip Code 46227			
Purpose of Disbursement: State Party Event Decorations				Allocated Activity or Event Year-To-Date 40010.77	
Activity or Event Identifier: 2012 Fall Dinner(10/29/2012)		Category/ Type		Date <input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2012"/>	
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
48.11			58.79		106.90

C. Full Name (Last, First, Middle Initial) Indiana Republican Party State Fund		Transaction ID : H4.17708		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 47 South Meridian Street, Ste 200					
City Indianapolis	State IN	Zip Code 46204			
Purpose of Disbursement: Transfer of Federal Share of In-kinds				Allocated Activity or Event Year-To-Date 9063.95	
Activity or Event Identifier: 2012 Fall Dinner In-Kinds(10/29/2012)		Category/ Type		Date <input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
2812.95			0.00		2812.95

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20299.59		22372.56		42672.15

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Mid America Beverage Inc.		Transaction ID : H4.17704		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 2856					
City Kokomo	State IN	Zip Code 46902			
Purpose of Disbursement: In-kind Beverages for State Party Event		Category/ Type		Allocated Activity or Event Year-To-Date 5056.00	
Activity or Event Identifier: 2012 Fall Dinner In-Kinds(10/29/2012)				Date 10 / 26 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
0.00			603.50		603.50

B. Full Name (Last, First, Middle Initial) Sport Graphics		Transaction ID : H4.17706		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 3423 Park Davis Circle					
City Indianapolis	State IN	Zip Code 46235			
Purpose of Disbursement: In-Kind - State Party Posters & Banners for Event		Category/ Type		Allocated Activity or Event Year-To-Date 6251.00	
Activity or Event Identifier: 2012 Fall Dinner In-Kinds(10/29/2012)				Date 10 / 26 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
0.00			1195.00		1195.00

C. Full Name (Last, First, Middle Initial) Vision Concepts		Transaction ID : H4.17702		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 9347 Pendelton Pike					
City Indianapolis	State IN	Zip Code 46236			
Purpose of Disbursement: In-Kind Beverages for State Party Event		Category/ Type		Allocated Activity or Event Year-To-Date 2652.50	
Activity or Event Identifier: 2012 Fall Dinner In-Kinds(10/29/2012)				Date 10 / 26 / 2012	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
0.00			2652.50		2652.50

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		4451.00		4451.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

INDIANA REPUBLICAN STATE COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.17703			Allocated Activity or Event:	
Wine & Spirits Distributors of Indiana			<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 135 N Pennsylvania Street Suite 1175			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City	State	Zip Code	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Indianapolis	IN	46204		
Purpose of Disbursement: In-Kind Beverages for State Party Event		Category/ Type	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: 2012 Fall Dinner In-Kinds(10/29/2012)			<div style="border: 1px solid black; padding: 2px; text-align: right;">4452.50</div>	
Date		<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y 10 / 26 / 2012</div> </div>		
FEDERAL SHARE		+	NONFEDERAL SHARE	
<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>			<div style="border: 1px solid black; padding: 2px; text-align: right;">1800.00</div>	
		=	TOTAL AMOUNT	
			<div style="border: 1px solid black; padding: 2px; text-align: right;">1800.00</div>	

B. Full Name (Last, First, Middle Initial)			Allocated Activity or Event:	
Mailing Address			<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
State			<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Zip Code				
Purpose of Disbursement:		Category/ Type	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:			<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>	
Date		<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
FEDERAL SHARE		+	NONFEDERAL SHARE	
<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>			<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>	
		=	TOTAL AMOUNT	
			<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>	

C. Full Name (Last, First, Middle Initial)			Allocated Activity or Event:	
Mailing Address			<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
State			<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Zip Code				
Purpose of Disbursement:		Category/ Type	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:			<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>	
Date		<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
FEDERAL SHARE		+	NONFEDERAL SHARE	
<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>			<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>	
		=	TOTAL AMOUNT	
			<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		1800.00		1800.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
35565.29	55724.72	91290.01