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FEC
FORM 1

STATEMENT OF
ORGANIZATION

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5
INDIANA REPUBLICAN ASSEMBLY SUPERPAC

ADDRESS (number and street) (Check if address is changed)
PO BOX 533075
INDIANAPOLIS IN 46253-
CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Check if address is changed)
INFO@INRA SUPERPAC.COM
Optional Second E-Mail Address

COMMITTEE'S WEB-PAGE ADDRESS (URL) (Check if address is changed)
WWW.INRASUPERPAC.COM

2. DATE 07 12 2020

3. FEC IDENTIFICATION NUMBER 00522474

4. IS THIS STATEMENT NEW (N) OR AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer J D MINIEAR

Signature of Treasurer [Signature] Date 07 12 2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

5. TYPE OF COMMITTEE

Candidate Committee:

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate _____

Candidate Party Affiliation Office Sought: House Senate President State
 District

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

- (d) This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
 - Corporation Corporation w/o Capital Stock Labor Organization
 - Membership Organization Trade Association Cooperative
 - In addition, this committee is a Lobbyist/Registrant PAC.
- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
 - In addition, this committee is a Lobbyist/Registrant PAC.
 - In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1.	_____	FEC ID number	C _____
2.	_____	FEC ID number	C _____
3.	_____	FEC ID number	C _____
4.	_____	FEC ID number	C _____

BUREAU OF THE CHIEF OF BUREAU

Write or Type Committee Name

INDIANA REPUBLICAN ASSEMBLY SUPER PAC

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for mailing address]

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

JD MINIEAR

Mailing Address

PO BOX 533075

INDIANAPOLIS

IN

46253

Title or Position

CITY

STATE

ZIP CODE

CUSTODIAN OF RECORD

Telephone number

317-448-1088

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer

JD MINIEAR

Mailing Address

PO BOX 533075

INDIANAPOLIS

IN

46253

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

317-448-1088

2009-11-10 11:50:00 AM

Full Name of Designated Agent

J D MINTEAR

Mailing Address

PO BOX 533075

INDIANAPOLIS

CITY

IN

STATE

46253

ZIP CODE

Title or Position

MEDIA DIRECTOR

Telephone number

317-448-7088

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

REGIONS BANK

Mailing Address

3020 S EMERSON AVE

INDIANAPOLIS

CITY

IN

STATE

46203

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

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**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 ASSEMBLY SUPERPAC

ADDRESS (number and street) PO BOX 533075

Check if different than previously reported. (ACC)

INDIANAPOLIS IN 46253

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C00523474 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 / / in the State of

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

General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period 04 / 07 / 2020 through 06 / 30 / 2020

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 JD MUMFAR

Signature of Treasurer *JD Mumfar* Date 07 / 13 / 2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

INDIANA REPUBLICAN ASSEMBLY SUPERPAC

Report Covering the Period: From:

04 ' 01 ' 2020

To:

06 ' 30 ' 2020

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2020		42
(b) Cash on Hand at Beginning of Reporting Period.....	1261	
(c) Total Receipts (from Line 19).....	0	10900
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1261	10742
7. Total Disbursements (from Line 31).....	522	9997
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	745	745
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....		

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

For further information contact:

Federal Election Commission
1050 First Street, N.E.
Washington, DC 20463

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

DETAILED SUMMARY PAGE

of Receipts

Write or Type Committee Name

INDIANA REPUBLICAN ASSEMBLY SUPERPAC

Report Covering the Period: From:

04 01 2020

To:

06 30 2020

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).....

(ii) Unitemized.....

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

(b) Political Party Committees.....

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

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

12. Transfers From Affiliated/Other Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

17. Other Federal Receipts (Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

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

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

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

Grid for Column A, Line 11(i)

Grid for Column A, Line 11(ii)

Grid for Column A, Line 11(iii)

Grid for Column A, Line 11(b)

Grid for Column A, Line 11(c)

Grid for Column A, Line 11(d)

Grid for Column A, Line 12

Grid for Column A, Line 13

Grid for Column A, Line 14

Grid for Column A, Line 15

Grid for Column A, Line 16

Grid for Column A, Line 17

Grid for Column A, Line 18(a)

Grid for Column A, Line 18(b)

Grid for Column A, Line 18(c)

Grid for Column A, Line 19

Grid for Column A, Line 20

Grid for Column B, Line 11(i)

Grid for Column B, Line 11(ii)

Grid for Column B, Line 11(iii)

Grid for Column B, Line 11(b)

Grid for Column B, Line 11(c)

Grid for Column B, Line 11(d)

Grid for Column B, Line 12

Grid for Column B, Line 13

Grid for Column B, Line 14

Grid for Column B, Line 15

Grid for Column B, Line 16

Grid for Column B, Line 17

Grid for Column B, Line 18(a)

Grid for Column B, Line 18(b)

Grid for Column B, Line 18(c)

Grid for Column B, Line 19

Grid for Column B, Line 20

107.00

107.00

107.00

107.00

107.00

2020 JUN 30 11 20 AM

DETAILED SUMMARY PAGE
of Disbursements

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		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures	522	9997
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	522	9997
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....		
29. Other Disbursements (Including Non-Federal Donations).....		
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	522	9997
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	522	9997

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DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)		197.00
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)		197.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	522	9997
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)	522	9997

FORM 3X (REV. 05/2016)

**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)					PAGE	OF
	<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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		

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 ASSEMBLY SUPERPAC

A.

Full Name (Last, First, Middle Initial): **USPS**

Mailing Address: **202 MAIN ST**

City: **BEECH GROVE** State: **IN** Zip Code: **46107**

Purpose of Disbursement: **POSTAGE**

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

Date of Disbursement: **04 / 15 / 2020**

FEC Identification Number: **C**

Amount of Each Disbursement this Period: **4.25**

Memo Item

B.

Full Name (Last, First, Middle Initial): **FEDEX**

Mailing Address: **5030 W PIKE PLAZA**

City: **INDIANAPOLIS** State: **IN** Zip Code: **46254**

Purpose of Disbursement: **COPIES**

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

Date of Disbursement: **04 / 15 / 2020**

FEC Identification Number: **C**

Amount of Each Disbursement this Period: **99**

Memo Item

C.

Full Name (Last, First, Middle Initial): _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Purpose of Disbursement: _____

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

Date of Disbursement: _____

FEC Identification Number: **C**

Amount of Each Disbursement this Period: _____

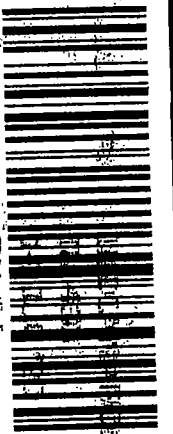
Memo Item

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

TOTAL This Period (last page this line number only).....▶ **522**

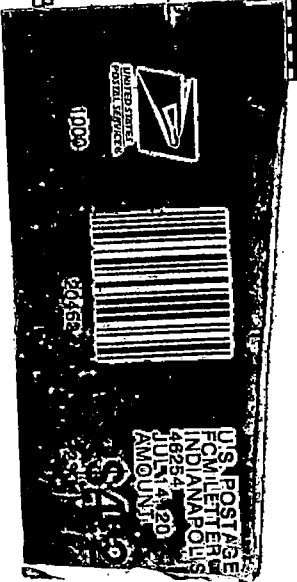
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CERTIFIED MAIL

10RA S0884AC
PO Box 533075
Indianapolis, IN 46253



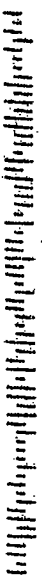
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FEDERAL ELECTORAL COMMISSION
1050 FIRST STREET, NE
WASHINGTON, DC 20463




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<input type="checkbox"/> No Postmark	
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