

# 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**  
McDonald Hopkins LLC PAC

ADDRESS (number and street) 600 Superior Avenue Suite 2100  
Check if different than previously reported. (ACC) Cleveland OH 44114

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C** C00394460 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 / 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 11 / 03 / 2020 in the State of OH

5. Covering Period 10 / 01 / 2020 through 11 / 23 / 2020

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Kall, David, M., ,  
Type or Print Name of Treasurer

Signature of Treasurer Kall, David, M., , [Electronically Filed] Date 12 / 03 / 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)

Write or Type Committee Name

**McDonald Hopkins LLC PAC**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>		<input type="text" value="35838.29"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="37554.64"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="14056.66"/>	<input type="text" value="37249.64"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="51611.30"/>	<input type="text" value="73087.93"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="5745.37"/>	<input type="text" value="27222.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="45865.93"/>	<input type="text" value="45865.93"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

Write or Type Committee Name

**McDonald Hopkins LLC PAC**

Report Covering the Period: From:  /  /  To:  /  /

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).....	14056.66	33514.95
(ii) Unitemized .....	0.00	3534.69
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	14056.66	37049.64
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	14056.66	37049.64
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
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	200.00
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).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	14056.66	37249.64
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	14056.66	37249.64

**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 .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	2995.37	14622.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	2995.37	14622.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
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	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	2750.00	12100.00
30. Federal Election Activity (52 U.S.C. § 30101(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 .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	5745.37	27222.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5745.37	27222.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	14056.66	37049.64
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	14056.66	37049.64
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	2995.37	14622.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	200.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	2995.37	14422.00

**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)	PAGE 6 OF 13
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**McDonald Hopkins LLC PAC**

**A. ARFONS, CHAD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address MCDONALD HOPKINS LLC 600 SUPERIOR STE 2100  
 City CLEVELAND State OH Zip Code 44114  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) McDonald Hopkins LLC Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 29 / 2020  
**Transaction ID : A2020-2405068**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. BERNHARDT, PETER, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address MCDONALD HOPKINS LLC 505 SOUTH FLA STE 300  
 City WEST PALM BEACH State FL Zip Code 33401  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) McDonald Hopkins LLC Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 874.97

Date of Receipt 10 / 30 / 2020  
**Transaction ID : A2020-2381130**  
 Amount of Each Receipt this Period 125.00  
 Memo Item

**C. CARMEL, MARC, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address MCDONALD HOPKINS LLC 300 NORTH LAS  
 City CHICAGO State IL Zip Code 60654  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) McDonald Hopkins LLC Occupation (for Individual) Executive  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 308.33

Date of Receipt 10 / 30 / 2020  
**Transaction ID : A2020-2381131**  
 Amount of Each Receipt this Period 83.33  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1208.33
<b>TOTAL</b> 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)	PAGE 7 OF 13
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**McDonald Hopkins LLC PAC**

**A. CONSOLO, JEFFREY, P, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **MCDONALD HOPKINS LLC 600 SUPERIOR STE 2100**

City **CLEVELAND** State **OH** Zip Code **44114**

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

Name of Employer (for Individual) **McDonald Hopkins LLC** Occupation (for Individual) **Attorney**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **3000.00**

Date of Receipt **11 / 09 / 2020**  
**Transaction ID : A2020-2617823**

Amount of Each Receipt this Period **3000.00**

Memo Item

**B. GISZCZAK, JAMES, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **MCDONALD HOPKINS LLC 39533 WOODWAR STE 318**

City **BLOOMFIELD HILLS** State **MI** Zip Code **48304**

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

Name of Employer (for Individual) **McDonald Hopkins LLC** Occupation (for Individual) **Attorney**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **3000.00**

Date of Receipt **10 / 27 / 2020**  
**Transaction ID : A2020-2405067**

Amount of Each Receipt this Period **3000.00**

Memo Item

**C. GRAIS, ADAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **MCDONALD HOPKINS LLC 600 SUPERIOR STE 2100**

City **CLEVELAND** State **OH** Zip Code **44114**

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

Name of Employer (for Individual) **McDonald Hopkins LLC** Occupation (for Individual) **Attorney**

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼ **550.00**

Date of Receipt **10 / 30 / 2020**  
**Transaction ID : A2020-2381138**

Amount of Each Receipt this Period **550.00**

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>6550.00</b>
<b>TOTAL</b> 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)	PAGE 8 OF 13
<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)  
**McDonald Hopkins LLC PAC**

**A. GUNNING II, DAVID, H, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **MCDONALD HOPKINS LLC 600 SUPERIOR STE 2100**

City <b>CLEVELAND</b>	State <b>OH</b>	Zip Code <b>44114</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) <b>McDonald Hopkins LLC</b>	Occupation (for Individual) <b>Attorney</b>
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1070.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2020

**Transaction ID : A2020-2381132**

Amount of Each Receipt this Period  

125.00
--------

 Memo Item

**B. Hopkins, Christopher, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **McDonald Hopkins LLC 505 South Fla**

City <b>West Palm Beach</b>	State <b>FL</b>	Zip Code <b>33401</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) <b>McDonald Hopkins LLC</b>	Occupation (for Individual) <b>Attorney</b>
--	--

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
11	/	04	/	2020

**Transaction ID : A2020-2617822**

Amount of Each Receipt this Period  

500.00
--------

 Memo Item

**C. LINDOW, BILL, O, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **MCDONALD HOPKINS LLC 600 SUPERIOR STE 2100**

City <b>CLEVELAND</b>	State <b>OH</b>	Zip Code <b>44114</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) <b>McDonald Hopkins LLC</b>	Occupation (for Individual) <b>CFO</b>
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2020

**Transaction ID : A2020-2381133**

Amount of Each Receipt this Period  

40.00
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 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>665.00</b>
<b>TOTAL</b> 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 13
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**McDonald Hopkins LLC PAC**

**A. MEANEY, MICHAEL, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **MCDONALD HOPKINS LLC 600 SUPERIOR STE 2100**

City <b>CLEVELAND</b>	State <b>OH</b>	Zip Code <b>44114</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) <b>McDonald Hopkins LLC</b>	Occupation (for Individual) <b>Attorney</b>
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**458.36**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2020

**Transaction ID : A2020-2381134**

Amount of Each Receipt this Period  

83.33
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 Memo Item

**B. METZGER, JOHN, T, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **MCDONALD HOPKINS LLC 505 SOUTH FLA STE 300**

City <b>WEST PALM BEACH</b>	State <b>FL</b>	Zip Code <b>33401</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) <b>McDonald Hopkins LLC</b>	Occupation (for Individual) <b>Attorney</b>
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**2124.97**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2020

**Transaction ID : A2020-2381135**

Amount of Each Receipt this Period  

250.00
--------

 Memo Item

**C. O'BRYON, MARGARET, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **600 Superior Avenue Suite 21000**

City <b>Cleveland</b>	State <b>OH</b>	Zip Code <b>44114</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) <b>McDonald Hopkins LLC</b>	Occupation (for Individual) <b>Attorney</b>
--	--

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		30		2020

**Transaction ID : A2020-2381136**

Amount of Each Receipt this Period  

50.00
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 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>383.33</b>
<b>TOTAL</b> 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 10 OF 13
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**McDonald Hopkins LLC PAC**

**A. RILEY, SHAWN, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address MCDONALD HOPKINS LLC 600 SUPERIOR STE 2100  
 City CLEVELAND State OH Zip Code 44114  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) McDonald Hopkins LLC Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **10 / 16 / 2020**  
**Transaction ID : A2020-2405066**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. WISE, MICHAEL, W, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address MCDONALD HOPKINS LLC 600 SUPERIOR STE 2100  
 City CLEVELAND State OH Zip Code 44114  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) McDonald Hopkins LLC Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2140.00

Date of Receipt **10 / 30 / 2020**  
**Transaction ID : A2020-2381137**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼

Date of Receipt  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5250.00
<b>TOTAL</b> This Period (last page this line number only).....	14056.66

**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)

<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

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NAME OF COMMITTEE (In Full)  
**McDonald Hopkins LLC PAC**

Full Name (Last, First, Middle Initial) <b>A. Public Affairs Support Services Inc.</b>		Date of Disbursement MM / DD / YYYY 11 / 18 / 2020
Mailing Address 1950 Roland Clarke Place Suite 300		FEC Identification Number C [ ] <b>Transaction ID : B781149</b>
City Reston	State VA	Zip Code 20191
Purpose of Disbursement Compliance reporting & recordkeeping		Amount of Each Disbursement this Period [ ] 1698.02
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:	Not Applicable	

Full Name (Last, First, Middle Initial) <b>B. Public Affairs Support Services Inc.</b>		Date of Disbursement MM / DD / YYYY 11 / 18 / 2020
Mailing Address 1950 Roland Clarke Place Suite 300		FEC Identification Number C [ ] <b>Transaction ID : B781150</b>
City Reston	State VA	Zip Code 20191
Purpose of Disbursement Compliance reporting & recordkeeping		Amount of Each Disbursement this Period [ ] 1297.35
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:	Not Applicable	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY [ ] / [ ] / [ ]
Mailing Address		FEC Identification Number C [ ]
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period [ ]
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2995.37
<b>TOTAL</b> This Period (last page this line number only).....▶	2995.37

**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)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**McDonald Hopkins LLC PAC**

**A. Cupp for State Representative**

Full Name (Last, First, Middle Initial)

Mailing Address 211 S. Fifth Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
G-2020 State House 04 OH

011  
Category/  
Type

Candidate Name  
**Cupp, Bob, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: OH District: 04

Date of Disbursement  
MM / DD / YYYY  
10 / 19 / 2020

FEC Identification Number  
C  
Transaction ID : **B779098**  
Amount of Each Disbursement this Period  
1000.00

Memo Item

**B. Friends of Judge McClelland**

Full Name (Last, First, Middle Initial)

Mailing Address 4807 Rockside Road #250

City Independence State OH Zip Code 44131

Purpose of Disbursement  
G-2020 Common Pleas Court Judge Cuyahoga

011  
Category/  
Type

Candidate Name  
**McClelland, Robert, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: OH District:

Date of Disbursement  
MM / DD / YYYY  
10 / 19 / 2020

FEC Identification Number  
C  
Transaction ID : **B778642**  
Amount of Each Disbursement this Period  
250.00

Memo Item

**C. Friends of Shay Hawkins**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 606147

City Cleveland State OH Zip Code 44106

Purpose of Disbursement  
G-2020 State House 6 Cuyahoga Co OH

011  
Category/  
Type

Candidate Name  
**Hawkins, Shay, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: OH District: 06

Date of Disbursement  
MM / DD / YYYY  
10 / 30 / 2020

FEC Identification Number  
C  
Transaction ID : **B780641**  
Amount of Each Disbursement this Period  
250.00

Memo Item

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

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**McDonald Hopkins LLC PAC**

Full Name (Last, First, Middle Initial)

**A. Friends of Sandra Williams**

Mailing Address 12518 Fairhill Road

City Cleveland State OH Zip Code 44120

Purpose of Disbursement  
P-2022 State Senate 21 OH

011

Category/  
Type

Candidate Name  
**Williams, Sandra, , ,**

Office Sought:  House  
 Senate  
 President  
State: OH District: 21

Disbursement For: 2022  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 30 / 2020

FEC Identification Number

C [ ]

Transaction ID : **B780642**

Amount of Each Disbursement this Period

[ ] 250.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. LaRose for Ohio**

Mailing Address 211 S. Fifth Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
P-2022 Sec. of State OH

011

Category/  
Type

Candidate Name  
**LaRose, Frank, , ,**

Office Sought:  House  
 Senate  
 President  
State: OH District:

Disbursement For: 2022  
 Primary  General  
 Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 19 / 2020

FEC Identification Number

C [ ]

Transaction ID : **B781259**

Amount of Each Disbursement this Period

[ ] 1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

[ ]

Category/  
Type

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

FEC Identification Number

C [ ]

Amount of Each Disbursement this Period

[ ]

Memo Item

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

[ ] 1250.00

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

[ ] 2750.00