

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

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

Poetter for Congress

ADDRESS (number and street)

2118 Dana Drive

Check if different  
than previously  
reported. (ACC)

Oxford

OH

45056

2. **FEC IDENTIFICATION NUMBER** ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C

C00550954

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

OH

08

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y  
11 / 04 / 2014in the  
State of

OH

(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y  
10 / 01 / 2014

through

M M / D D / Y Y Y Y  
10 / 15 / 2014

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 Kelly A Marks

Signature of Treasurer

Kelly A Marks

[Electronically Filed]

Date

M M / D D / Y Y Y Y  
10 / 22 / 2014

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 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Poetter for Congress

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	16900.00	181789.14
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	16900.00	181789.14
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	29733.18	68691.70
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	29733.18	68691.70
8. Cash on Hand at Close of Reporting Period (from Line 27).....	90809.15	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

## For further information contact:

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

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

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name

Poetter for Congress

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	1	4

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date
**11. CONTRIBUTIONS (other than loans) FROM:****(a) Individuals/Persons Other Than Political Committees**

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

15425.00

150161.14

(ii) Unitemized.....

1475.00

27878.00

(iii) TOTAL of contributions from individuals ▶

16900.00

178039.14

**(b) Political Party Committees.....**

0.00

0.00

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

0.00

3750.00

**(d) The Candidate.....**

0.00

0.00

**(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..**

16900.00

181789.14

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

0.00

**13. LOANS:****(a) Made or Guaranteed by the Candidate.....**

0.00

0.00

**(b) All Other Loans.....**

0.00

0.00

**(c) TOTAL LOANS (add Lines 13(a) and (b)).....**

0.00

0.00

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

0.00

0.00

**15. OTHER RECEIPTS (Dividends, Interest, etc.) .....**

0.00

0.00

**16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶**

16900.00

181789.14

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 20

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	29733.18	68691.70
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	29733.18	68691.70

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	103642.33
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	16900.00
25. SUBTOTAL (add Line 23 and Line 24).....	120542.33
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	29733.18
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	90809.15

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

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

FOR LINE NUMBER:

PAGE 5 OF 20

(check only one)

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

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NAME OF COMMITTEE (In Full)

Poetter for Congress

Full Name (Last, First, Middle Initial)

A. Mariette Allen

Mailing Address 100 Riverside Dr

City

New York

State

NY

Zip Code

10024-4822

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
selfOccupation  
Photographer

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2014

Transaction ID : VNVW5D4E941

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Reinier Beeuwkes III

Mailing Address 1360 Monument St

City

Concord

State

MA

Zip Code

01742-5322

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
IschemixOccupation  
President

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2014

Transaction ID : VNVW5D35GC5

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

C. Elwyn Berlekamp

Mailing Address 2625 Alcatraz Ave  
# 323

City

Berkeley

State

CA

Zip Code

94705-2702

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/aOccupation  
retired

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2014

Transaction ID : VNVW5D49GX1

Amount of Each Receipt this Period

500.00

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

3600.00

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

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

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

FOR LINE NUMBER: PAGE 6 OF 20

(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Poetter for Congress**

Full Name (Last, First, Middle Initial) <b>Pricilla Browning</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address 1 Pleasant Grove Ln		Transaction ID : VNVW5D3KGP6
City Ithaca	State NY	
Zip Code 14850-2548		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>Tim Crawford</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 03 / 2014
Mailing Address 926 Glos Dr		Transaction ID : VNVW5D3XBA8
City Oxford	State OH	
Zip Code 45056-2059		Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		
Name of Employer Jake Sweeney	Occupation retail	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>Eddie Doss</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 05 / 2014
Mailing Address 905 High Rigger Ct		Transaction ID : VNVW5D3XBB6
City Nashville	State TN	
Zip Code 37217-4248		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		
Name of Employer ResourceTek, LLC	Occupation Mechanical Engineer	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	525.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Poetter for Congress**

A. Full Name (Last, First, Middle Initial)  
**William Friedman**

Mailing Address 320 Central Park W

City	State	Zip Code
New York	NY	10025-7659

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Beachwold Residential

Occupation  
 real estate investor

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2014

Transaction ID : VNVW5D3YTV1

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)  
**Sanford M Gage**

Mailing Address 10284 Century Woods Dr

City	State	Zip Code
Los Angeles	CA	90067-6304

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Sanford M. Gage Law Firm

Occupation  
 Attorney

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2014

Transaction ID : VNVW5D2Z1Y8

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)  
**Heidi Good**

Mailing Address 3018 N Blue Meadow Cir

City	State	Zip Code
Sugar Land	TX	77479-1507

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Retired

Occupation  
 Retired

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2014

Transaction ID : VNVW5D4Q899

Amount of Each Receipt this Period

250.00

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

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

1000.00

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

PAGE 8 OF 20

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

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NAME OF COMMITTEE (In Full)  
**Poetter for Congress**Full Name (Last, First, Middle Initial)  
**A. Richard Johnson**

Mailing Address 6945 Angola Rd

City	State	Zip Code
Holland	OH	43528-8558

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2014

Transaction ID : VNVW5D48XR1

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)  
**B. Brittany Kay**

Mailing Address 11800 Sunshine Ter

City	State	Zip Code
Studio City	CA	91604-3844

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of Southern CaliforniaOccupation  
Full-Time Lecturer

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2014

Transaction ID : VNVW5D2YEN7

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)  
**C. Susan Kay**

Mailing Address 2640 Benedict Canyon Dr

City	State	Zip Code
Beverly Hills	CA	90210-1023

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Surgeon

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2014

Transaction ID : VNVW5D2WNM9

Amount of Each Receipt this Period

500.00

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

950.00



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

PAGE 9 OF 20

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

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NAME OF COMMITTEE (In Full)  
**Poetter for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mary Kuhlman**

Mailing Address 5600 Swan Rd

City State Zip Code  
Pemberville OH 43450-9853

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2014

Transaction ID : VNVW5D2KYF7

Amount of Each Receipt this Period

250.00

**B.** Full Name (Last, First, Middle Initial)  
**Seetha & Raja Lath**

Mailing Address 1844 Highland Oaks Dr

City State Zip Code  
Arcadia CA 91006-1737

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2014

Transaction ID : VNVW5D3KGS9

Amount of Each Receipt this Period

500.00

**C.** Full Name (Last, First, Middle Initial)  
**Dominick Lijoi**

Mailing Address 9398 Ambleside Dr

City State Zip Code  
West Chester OH 45241-1179

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

Name of Employer Occupation  
retired retired

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2014

Transaction ID : VNVW5D4SZ03

Amount of Each Receipt this Period

100.00

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

850.00
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# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 10 OF 20

(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Poetter for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Nelda McCabe**

Mailing Address 2095 Waterford Dr

City State Zip Code  
 Muscle Shoals AL 35661-4106

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

Name of Employer Occupation  
 Retired Retired

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
 700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		06		2014

Transaction ID : VNVW5D3KFZ4

Amount of Each Receipt this Period

500.00
--------

**B.** Full Name (Last, First, Middle Initial)  
**Pat & Lois Meade**

Mailing Address 100 Lantern Ridge Rd

City State Zip Code  
 Oxford OH 45056-9492

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

Name of Employer Occupation  
 Talawanda School District teacher

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
 350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		11		2014

Transaction ID : VNVW5D4GJK3

Amount of Each Receipt this Period

250.00
--------

**C.** Full Name (Last, First, Middle Initial)  
**Jill Meyer**

Mailing Address 512 Los Nidos Dr

City State Zip Code  
 Santa Fe NM 87501-8356

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

Name of Employer Occupation  
 none none

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
 250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		06		2014

Transaction ID : VNVW5D3XBD2

Amount of Each Receipt this Period

250.00
--------

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

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

1000.00
---------

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

PAGE 11 OF 20

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

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NAME OF COMMITTEE (In Full)  
**Poetter for Congress**

Full Name (Last, First, Middle Initial)

**A. Maura Morey**

Mailing Address 134 Lyford Dr

City

Bel Tiburon

State

CA

Zip Code

94920-1615

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Private Investor

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2014

Transaction ID : VNVW5D4JGT8

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Evangeline Morphos**Mailing Address 300 Central Park W  
Apt 5J

City

New York

State

NY

Zip Code

10024-1579

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Columbia UniversityOccupation  
Professor

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2014

Transaction ID : VNVW5D4JGM1

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Grant Morrow III**

Mailing Address 253 N Columbia Ave

City

Columbus

State

OH

Zip Code

43209-1417

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Nationwide Children'sOccupation  
physician

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2014

Transaction ID : VNVW5D63FS6

Amount of Each Receipt this Period

750.00

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

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

1500.00

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

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

FOR LINE NUMBER:

PAGE 12 OF 20

(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Poetter for Congress**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Constance Murray</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>03</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	10		03		2014
M M M	/	D D D	/	Y Y Y Y Y									
10		03		2014									
Mailing Address 10 Oak Meadow Ln		<b>Transaction ID : VNVW5D35G42</b>											
City Carmel Valley	State CA	Zip Code 93924-9455	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>100.00</td> </tr> </table>						100.00				
					100.00								
FEC ID number of contributing federal political committee. <div>C</div>													
Name of Employer Retired	Occupation Retired												
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>600.00</td> </tr> </table>								600.00				
					600.00								
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Martin M Oshrin</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>02</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	10		02		2014
M M M	/	D D D	/	Y Y Y Y Y									
10		02		2014									
Mailing Address 1530 Palisade Ave Apt 19R		<b>Transaction ID : VNVW5D3XB90</b>											
City Fort Lee	State NJ	Zip Code 07024-5423	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>250.00</td> </tr> </table>						250.00				
					250.00								
FEC ID number of contributing federal political committee. <div>C</div>													
Name of Employer Retired	Occupation Retired												
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>1025.00</td> </tr> </table>								1025.00				
					1025.00								
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Diane Parker</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>14</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	10		14		2014
M M M	/	D D D	/	Y Y Y Y Y									
10		14		2014									
Mailing Address PO Box 1011		<b>Transaction ID : VNVW5D4SYW1</b>											
City Thomasville	State GA	Zip Code 31799-1011	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>600.00</td> </tr> </table>						600.00				
					600.00								
FEC ID number of contributing federal political committee. <div>C</div>													
Name of Employer The Gift Shop	Occupation Owner												
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>2100.00</td> </tr> </table>								2100.00				
					2100.00								
<b>SUBTOTAL</b> of Receipts This Page (optional).....		<table border="1"> <tr> <td colspan="5"></td> <td>950.00</td> </tr> </table>							950.00				
					950.00								
<b>TOTAL</b> This Period (last page this line number only).....		<table border="1"> <tr> <td colspan="5"></td> <td></td> </tr> </table>											

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

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

FOR LINE NUMBER:

PAGE 13 OF 20

(check only one)

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

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NAME OF COMMITTEE (In Full)

Poetter for Congress

Full Name (Last, First, Middle Initial)

Dianna Pendleotn-Dominguez

Mailing Address 401 N Main St

City

Saint Marys

State

OH

Zip Code

45885-2154

FEC ID number of contributing  
federal political committee.

C

Name of Employer

self employed Law Office of Dianna Pen

Occupation

attorney

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2014

Transaction ID : VNVW5D2YJ83

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Sandra Roberts

Mailing Address 3474 River Gardens Cir

City

Pensacola

State

FL

Zip Code

32514-8112

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2014

Transaction ID : VNVW5D2KYX8

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Marjorie Romans

Mailing Address 5124 Encino Ave

City

Encino

State

CA

Zip Code

91316-2522

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Not employed

Occupation

Not employed

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2014

Transaction ID : VNVW5D3XBC4

Amount of Each Receipt this Period

250.00

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

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

1000.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 14 OF 20

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

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NAME OF COMMITTEE (In Full)  
**Poetter for Congress**

Full Name (Last, First, Middle Initial)

**Richard H. Rosenthal**

Mailing Address 123 E Liberty St

City

Cincinnati

State

OH

Zip Code

45202-6509

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

2850.00

Date of Receipt

M M / D D / Y Y Y Y  
10 / 08 / 2014

Transaction ID : VNVW5D3YVJ3

Amount of Each Receipt this Period

1600.00

Full Name (Last, First, Middle Initial)

**Stanley D. Ross Esq.**

Mailing Address 3030 Stoney Bridge Ln

City

Columbus

State

OH

Zip Code

43221-4938

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

retired attorney

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
10 / 06 / 2014

Transaction ID : VNVW5D3KG36

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Sarah Strasser**

Mailing Address 7778 Riverside Dr

City

Dublin

State

OH

Zip Code

43016-9726

FEC ID number of contributing  
federal political committee.

C

Name of Employer

retired

Occupation

retired

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

700.00

Date of Receipt

M M / D D / Y Y Y Y  
10 / 10 / 2014

Transaction ID : VNVW5D4DZ99

Amount of Each Receipt this Period

200.00

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

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

2800.00

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

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

FOR LINE NUMBER:

PAGE 15 OF 20

(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Poetter for Congress**

A. Full Name (Last, First, Middle Initial)  
**Andrew Tobias**

Mailing Address **146 Central Park W**

City State Zip Code  
**New York NY 10023-6297**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
self

Occupation  
writer

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

**2000.00**

Date of Receipt

**10 / 10 / 2014**

Transaction ID : **VNVW5D4DES8**

Amount of Each Receipt this Period

**1000.00**

B. Full Name (Last, First, Middle Initial)  
**Margaret Vining**

Mailing Address **150 12th St NE**

City State Zip Code  
**Washington DC 20002-6471**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Smithsonian Institution

Occupation  
Curator

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

**500.00**

Date of Receipt

**10 / 02 / 2014**

Transaction ID : **VNVW5D2W4X3**

Amount of Each Receipt this Period

**250.00**

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

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)

Election Cycle-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).....

**1250.00**

**15425.00**

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

PAGE 16 OF 20

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Poetter for Congress**

Full Name (Last, First, Middle Initial)

**A. Act Blue**

Mailing Address PO Box 441146

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		05		2014

City	State	Zip Code
West Somerville	MA	02144-0031

Purpose of Disbursement  
fundraising service charge

003

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Amount of Each Disbursement this Period

78.05
-------

Transaction ID : VNTWX9Q6H50

**B. Act Blue**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 441146

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		12		2014

City	State	Zip Code
West Somerville	MA	02144-0031

Purpose of Disbursement  
fundraising service fee

003

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Amount of Each Disbursement this Period

43.46
-------

Transaction ID : VNTWX9Q6H68

**C. Act Blue**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 441146

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2014

City	State	Zip Code
West Somerville	MA	02144-0031

Purpose of Disbursement  
fundraising service fee

003

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Amount of Each Disbursement this Period

3.96
------

Transaction ID : VNTWX9Q6H91

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

78.05



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

PAGE 17 OF 20

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Poetter for Congress**

Full Name (Last, First, Middle Initial)

**A. NGP Van, Inc**Mailing Address 48 Grove St  
Ste 202

City Somerville State MA Zip Code 02144-2500

Purpose of Disbursement  
software use charge

003

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
10	02	2014

Amount of Each Disbursement this Period

700.00
--------

Transaction ID : VNTWX9PVC78

**B. Ohio Democratic Party**

Mailing Address 340 E Fulton St

City Columbus State OH Zip Code 43215-5418

Purpose of Disbursement  
salary

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
10	06	2014

Amount of Each Disbursement this Period

9693.50
---------

Transaction ID : VNTWX9PVPDF4

**c. Ohio Democratic Party**

Mailing Address 340 E Fulton St

City Columbus State OH Zip Code 43215-5418

Purpose of Disbursement  
ODP Federal Account contribution

011

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
10	06	2014

Amount of Each Disbursement this Period

500.00
--------

Transaction ID : VNTWX9Q5V37

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

10893.50

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

PAGE 18 OF 20

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Poetter for Congress**

Full Name (Last, First, Middle Initial)

**A. Ohio Democratic Party**

Mailing Address 340 E Fulton St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		06		2014

City	State	Zip Code
Columbus	OH	43215-5418

Amount of Each Disbursement this Period

7600.00
---------

Purpose of Disbursement  
Contribution

011

Transaction ID : VNTWX9Q5V53

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**B. Ohio Democratic Party**

Mailing Address 340 E Fulton St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2014

City	State	Zip Code
Columbus	OH	43215-5418

Amount of Each Disbursement this Period

9600.00
---------

Purpose of Disbursement  
contribution

011

Transaction ID : VNTWX9Q5V87

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**c. Sage Payment Solutions**

Mailing Address 6561 Irvine Center Dr

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2014

City	State	Zip Code
Irvine	CA	92618-2118

Amount of Each Disbursement this Period

607.37
--------

Purpose of Disbursement  
payment collections charges

003

Transaction ID : VNTWX9Q5TX0

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<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).....

17807.37

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

PAGE 19 OF 20

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Poetter for Congress

Full Name (Last, First, Middle Initial)

**A. Tim Myers, LLC**

Mailing Address 5020 College Corner Pike

City	State	Zip Code
Oxford	OH	45056-1103

Purpose of Disbursement  
rent

001

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2014

Amount of Each Disbursement this Period

350.00
--------

Transaction ID : VNTWX9PVC11

**B. USPS**

Full Name (Last, First, Middle Initial)

Mailing Address 5145 Brown Rd

City	State	Zip Code
Oxford	OH	45056-4000

Purpose of Disbursement  
postage

003

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		03		2014

Amount of Each Disbursement this Period

16.95
-------

Transaction ID : VNTWX9PVD53

**c. USPS**

Full Name (Last, First, Middle Initial)

Mailing Address 5145 Brown Rd

City	State	Zip Code
Oxford	OH	45056-4000

Purpose of Disbursement  
stampe

003

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2014

Amount of Each Disbursement this Period

98.00
-------

Transaction ID : VNTWX9Q5VD6

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

464.95

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

PAGE 20 OF 20

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Poetter for Congress**

Full Name (Last, First, Middle Initial)

**A. Walmart**

Mailing Address 5720 College Corner Pike

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2014

City	State	Zip Code
Oxford	OH	45056-1178

Purpose of Disbursement  
office supplies

001

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Amount of Each Disbursement this Period

304.96
--------

Transaction ID : VNTWX9Q5VA3

Full Name (Last, First, Middle Initial)

**B. Walmart**

Mailing Address 5720 College Corner Pike

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2014

City	State	Zip Code
Oxford	OH	45056-1178

Purpose of Disbursement  
office supplies

001

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Amount of Each Disbursement this Period

166.48
--------

Transaction ID : VNTWX9Q5VB1

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Purpose of Disbursement

Category/  
Type

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Amount of Each Disbursement this Period

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

471.44

29715.31