

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

RECEIVED  
FEC MAIL CENTER  
2007 FEB -1 AM 11:30  
Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5  
**KEATING, MUETHING & KLEKAMP PAC II**

**PAUL V. MUETHING**

ADDRESS (number and street) **SUITE 1400**  
**ONE EAST FOURTH STREET**  
 Check if different than previously reported. (ACC) **CINCINNATI OH 45202**

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

**C 0 0 3 4 8 7 9 7**

3. IS THIS REPORT **XX** NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(b) Monthly Report Due On:	Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(b) Quarterly Report:	Mar 20 (M3)	Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (Q1)	Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)	Jan 31 (YE)
July 15 Quarterly Report (Q2)	(c) 12-Day PRE-Election Report for the:	Primary (12P)	General (12G)	Runoff (12R)
October 15 Quarterly Report (Q3)		Convention (12C)	Special (12S)	
<b>X</b> January 31 Year-End Report (YE)	Election on	M M / D D / Y Y Y Y		in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30R)	Special (30S)
Termination Report (TER)	Election on	M M / D D / Y Y Y Y		in the State of

5. Covering Period **1 1 2 8 2 0 0 6** through **1 2 3 1 2 0 0 6**

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 **PAUL V. MUETHING**

Signature of Treasurer *Paul V. Muething* Date **0 1 2 9 2 0 0 7**

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

27039372079

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**KEATING, MUETHING & KLEKAMP PAC II**

Report Covering the Period: From: M M D D Y Y Y Y 1 1 2 8 2 0 0 6 To: M M D D Y Y Y Y 1 2 3 1 2 0 0 6

**COLUMN A  
This Period**

**COLUMN B  
Calendar Year-to-Date**

6. (a) Cash on Hand	<small>Y Y Y Y</small>		
January 1,	2 0 0 6		3,517.90
(b) Cash on Hand at			
Beginning of Reporting Period.....	2,617.90		
(c) Total Receipts (from Line 19).....			9,000.00
(d) Subtotal (add Lines 6(b) and			
6(c) for Column A and Lines	2,617.90		12,517.90
6(a) and 6(c) for Column B).....			
7. Total Disbursements (from Line 31).....		0 0 0	9,900.00
8. Cash on Hand at Close of			
Reporting Period			
(subtract Line 7 from Line 6(d)).....	2,617.90		2,617.90
9. Debts and Obligations Owed TO			
the Committee (itemize all on			
Schedule C and/or Schedule D).....		0 0 0	
10. Debts and Obligations Owed BY			
the Committee (itemize all on			
Schedule C and/or Schedule D).....		0 0 0	

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. 02/2003)

Page 3

Write or Type Committee Name

**KEATING, MUETHING & KLEKAMP PAC II**

Report Covering the Period: From: **1 1 2 8 2 0 0 6** To: **1 2 3 1 2 0 0 6**

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).....	0 0 0	9 0 0 0 0 0
(ii) Unitemized .....		
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0 0 0	9 0 0 0 0 0
(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) .....	0 0 0	9 0 0 0 0 0
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)).....▶	0 0 0	9 0 0 0 0 0
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	0 0 0	9 0 0 0 0 0

**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 .....	-	-
(ii) Non-Federal Share.....	-	-
(b) Other Federal Operating Expenditures .....	-	-
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	-	-
22. Transfers to Affiliated/Other Party Committees.....	-	-
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0 0 0	9 9 0 0 0 0
24. Independent Expenditures (use Schedule E) .....	-	-
25. Coordinated Party Expenditures (2 U.S.C. §441a(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 .....	-	-
30. Federal Election Activity (2 U.S.C. §431(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)) ..	0 0 0	9 9 0 0 0 0
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0 0 0	9 9 0 0 0 0

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**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) .....	0.000	9,000.000
34. Total Contribution Refunds (from Line 28(d)) .....	0.000	0.000
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0.000	9,000.000
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.000	0.000
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.000	0.000
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.000	0.000

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**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 1 OF 1

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)

**KEATING, MUETHING & KLEKAMP PAC II**

<b>A.</b> Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		
City	State	Zip Code
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
Name of Employer		
Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<b>B.</b> Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		
City	State	Zip Code
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
Name of Employer		
Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<b>C.</b> Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		
City	State	Zip Code
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
Name of Employer		
Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> 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 Page

FOR LINE NUMBER:  
 (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

**KEATING, MUETHING & KLEKAMP PAC II**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ ..... , ..... 0.00

**TOTAL** This Period (last page this line number only) ..... ▶ ..... , ..... 0.00

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**Federal Election Commission**  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

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<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>VPS</i>	Shipping Date <i>1/29/07</i>
Next Business Day Delivery <input checked="" type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

*EW*  
 PREPARER  
 (3/2005)

*2/1/07*  
 DATE PREPARED