

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 MM / DD / YYYY in the State of
(d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)
Election on MM / DD / YYYY in the State of

5. Covering Period MM / DD / YYYY through MM / DD / YYYY
07 / 01 / 2014 through 09 / 30 / 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 Mr. David M. Kall Esq.

Signature of Treasurer Mr. David M. Kall Esq. [Electronically Filed] Date 10 / 06 / 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.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

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="2014"/>		62463.51
(b) Cash on Hand at Beginning of Reporting Period.....	62539.47	
(c) Total Receipts (from Line 19)	16421.54	55144.62
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	78961.01	117608.13
7. Total Disbursements (from Line 31).....	27441.40	66088.52
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	51519.61	51519.61
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	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).....	16176.54	51357.78
(ii) Unitemized	245.00	3786.84
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	16421.54	55144.62
(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)	16421.54	55144.62
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	0.00
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))..... ▶	16421.54	55144.62
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	16421.54	55144.62

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	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	6100.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(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	27441.40	59988.52
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	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)) ..	27441.40	66088.52
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	27441.40	66088.52

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)	16421.54	55144.62
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	16421.54	55144.62
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

**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 46
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
McDonald Hopkins LLC PAC

Full Name (Last, First, Middle Initial) A. John Benko		Date of Receipt MM / DD / YYYY 07 / 29 / 2014 Transaction ID : SA11AI.6804
Mailing Address McDonald Hopkins LLC 39533 Woodward Ave, Ste 318		Amount of Each Receipt this Period 125.00
City Bloomfield Hills	State MI Zip Code 48304	
FEC ID number of contributing federal political committee. C		Payroll Deduction
Name of Employer McDonald Hopkins LLC	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 875.00	

Full Name (Last, First, Middle Initial) B. John Benko		Date of Receipt MM / DD / YYYY 08 / 27 / 2014 Transaction ID : SA11AI.6868
Mailing Address McDonald Hopkins LLC 39533 Woodward Ave, Ste 318		Amount of Each Receipt this Period 125.00
City Bloomfield Hills	State MI Zip Code 48304	
FEC ID number of contributing federal political committee. C		Payroll Deduction
Name of Employer McDonald Hopkins LLC	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. John Benko		Date of Receipt MM / DD / YYYY 09 / 23 / 2014 Transaction ID : SA11AI.6908
Mailing Address McDonald Hopkins LLC 39533 Woodward Ave, Ste 318		Amount of Each Receipt this Period 125.00
City Bloomfield Hills	State MI Zip Code 48304	
FEC ID number of contributing federal political committee. C		Payroll Deduction
Name of Employer McDonald Hopkins LLC	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1125.00	

SUBTOTAL of Receipts This Page (optional).....▶	375.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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

Full Name (Last, First, Middle Initial) A. Todd Benni		Date of Receipt MM / DD / YYYY 07 / 29 / 2014 Transaction ID : SA11AI.6805
Mailing Address McDonald Hopkins LLC 505 South Flagler Dr, Ste 300		Amount of Each Receipt this Period 62.50
City West Palm Beach	State FL	Zip Code 33401
FEC ID number of contributing federal political committee. C		Payroll Deduction
Name of Employer McDonald Hopkins LLC	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 437.50	

Full Name (Last, First, Middle Initial) B. Todd Benni		Date of Receipt MM / DD / YYYY 08 / 27 / 2014 Transaction ID : SA11AI.6869
Mailing Address McDonald Hopkins LLC 505 South Flagler Dr, Ste 300		Amount of Each Receipt this Period 62.50
City West Palm Beach	State FL	Zip Code 33401
FEC ID number of contributing federal political committee. C		Payroll Deduction
Name of Employer McDonald Hopkins LLC	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Todd Benni		Date of Receipt MM / DD / YYYY 09 / 23 / 2014 Transaction ID : SA11AI.6909
Mailing Address McDonald Hopkins LLC 505 South Flagler Dr, Ste 300		Amount of Each Receipt this Period 62.50
City West Palm Beach	State FL	Zip Code 33401
FEC ID number of contributing federal political committee. C		Payroll Deduction
Name of Employer McDonald Hopkins LLC	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 562.50	

SUBTOTAL of Receipts This Page (optional).....▶	187.50
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 46
<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. Peter Berk
Full Name (Last, First, Middle Initial)
Mailing Address McDonald Hopkins LLC
City Chicago State IL Zip Code 60654
FEC ID number of contributing federal political committee. **C**
Name of Employer McDonald Hopkins LLC Occupation Attorney
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **350.00**

Date of Receipt **07 / 29 / 2014**
Transaction ID : SA11AI.6806
Amount of Each Receipt this Period **50.00**
Payroll Deduction

B. Peter Berk
Full Name (Last, First, Middle Initial)
Mailing Address McDonald Hopkins LLC
City Chicago State IL Zip Code 60654
FEC ID number of contributing federal political committee. **C**
Name of Employer McDonald Hopkins LLC Occupation Attorney
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **400.00**

Date of Receipt **08 / 27 / 2014**
Transaction ID : SA11AI.6870
Amount of Each Receipt this Period **50.00**
Payroll Deduction

C. Peter Berk
Full Name (Last, First, Middle Initial)
Mailing Address McDonald Hopkins LLC
City Chicago State IL Zip Code 60654
FEC ID number of contributing federal political committee. **C**
Name of Employer McDonald Hopkins LLC Occupation Attorney
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **450.00**

Date of Receipt **09 / 23 / 2014**
Transaction ID : SA11AI.6910
Amount of Each Receipt this Period **50.00**
Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... **150.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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

Full Name (Last, First, Middle Initial) A. Peter Bernhardt		Date of Receipt MM / DD / YYYY 07 / 29 / 2014 Transaction ID : SA11AI.6807
Mailing Address 7664 Ironhorse Blvd		Amount of Each Receipt this Period 208.33
City West Palm Beach	State FL	Zip Code 33412
FEC ID number of contributing federal political committee. C	Payroll Deduction	
Name of Employer McDonald Hopkins LLC	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1458.31	

Full Name (Last, First, Middle Initial) B. Peter Bernhardt		Date of Receipt MM / DD / YYYY 08 / 27 / 2014 Transaction ID : SA11AI.6871
Mailing Address 7664 Ironhorse Blvd		Amount of Each Receipt this Period 208.33
City West Palm Beach	State FL	Zip Code 33412
FEC ID number of contributing federal political committee. C	Payroll Deduction	
Name of Employer McDonald Hopkins LLC	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1666.64	

Full Name (Last, First, Middle Initial) C. Peter Bernhardt		Date of Receipt MM / DD / YYYY 09 / 23 / 2014 Transaction ID : SA11AI.6911
Mailing Address 7664 Ironhorse Blvd		Amount of Each Receipt this Period 208.33
City West Palm Beach	State FL	Zip Code 33412
FEC ID number of contributing federal political committee. C	Payroll Deduction	
Name of Employer McDonald Hopkins LLC	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1874.97	

SUBTOTAL of Receipts This Page (optional).....▶	624.99
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 OF 46
	(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"/> 12
		<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

Full Name (Last, First, Middle Initial) A. James Boutrous		Date of Receipt MM / DD / YYYY 07 / 29 / 2014 Transaction ID : SA11AI.6808
Mailing Address 309 Grosse Pointe Blvd		Amount of Each Receipt this Period 125.00
City Grosse Pointe Farm	State MI	Zip Code 48236
FEC ID number of contributing federal political committee. C	Payroll Deduction	
Name of Employer McDonald Hopkins LLC	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 875.00	

Full Name (Last, First, Middle Initial) B. James Boutrous		Date of Receipt MM / DD / YYYY 08 / 27 / 2014 Transaction ID : SA11AI.6872
Mailing Address 309 Grosse Pointe Blvd		Amount of Each Receipt this Period 125.00
City Grosse Pointe Farm	State MI	Zip Code 48236
FEC ID number of contributing federal political committee. C	Payroll Deduction	
Name of Employer McDonald Hopkins LLC	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. James Boutrous		Date of Receipt MM / DD / YYYY 09 / 23 / 2014 Transaction ID : SA11AI.6912
Mailing Address 309 Grosse Pointe Blvd		Amount of Each Receipt this Period 125.00
City Grosse Pointe Farm	State MI	Zip Code 48236
FEC ID number of contributing federal political committee. C	Payroll Deduction	
Name of Employer McDonald Hopkins LLC	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1125.00	

SUBTOTAL of Receipts This Page (optional).....▶	375.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 46
<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

Full Name (Last, First, Middle Initial) A. Alan Burger		Date of Receipt MM / DD / YYYY 07 / 29 / 2014 Transaction ID : SA11AI.6809
Mailing Address 7005 Washington Road		Amount of Each Receipt this Period 166.67
City West Palm Beach	State FL	Zip Code 33405
FEC ID number of contributing federal political committee. C		Payroll Deduction
Name of Employer McDonald Hopkins LLC	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1166.69	

Full Name (Last, First, Middle Initial) B. Alan Burger		Date of Receipt MM / DD / YYYY 08 / 27 / 2014 Transaction ID : SA11AI.6873
Mailing Address 7005 Washington Road		Amount of Each Receipt this Period 166.67
City West Palm Beach	State FL	Zip Code 33405
FEC ID number of contributing federal political committee. C		Payroll Deduction
Name of Employer McDonald Hopkins LLC	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1333.36	

Full Name (Last, First, Middle Initial) C. Alan Burger		Date of Receipt MM / DD / YYYY 09 / 23 / 2014 Transaction ID : SA11AI.6913
Mailing Address 7005 Washington Road		Amount of Each Receipt this Period 166.67
City West Palm Beach	State FL	Zip Code 33405
FEC ID number of contributing federal political committee. C		Payroll Deduction
Name of Employer McDonald Hopkins LLC	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.03	

SUBTOTAL of Receipts This Page (optional).....▶	500.01
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 46
	<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

Full Name (Last, First, Middle Initial) A. Michael G Caputo		Date of Receipt MM / DD / YYYY 07 / 29 / 2014 Transaction ID : SA11AI.6810
Mailing Address 528 Forestview Road		Amount of Each Receipt this Period 250.00
City Bay Village	State OH	Zip Code 44140
FEC ID number of contributing federal political committee. C	Payroll Deduction	
Name of Employer McDonald Hopkins LLC	Occupation Principal	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1750.00	

Full Name (Last, First, Middle Initial) B. Michael G Caputo		Date of Receipt MM / DD / YYYY 08 / 27 / 2014 Transaction ID : SA11AI.6874
Mailing Address 528 Forestview Road		Amount of Each Receipt this Period 250.00
City Bay Village	State OH	Zip Code 44140
FEC ID number of contributing federal political committee. C	Payroll Deduction	
Name of Employer McDonald Hopkins LLC	Occupation Principal	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) c. Michael G Caputo		Date of Receipt MM / DD / YYYY 09 / 23 / 2014 Transaction ID : SA11AI.6914
Mailing Address 528 Forestview Road		Amount of Each Receipt this Period 250.00
City Bay Village	State OH	Zip Code 44140
FEC ID number of contributing federal political committee. C	Payroll Deduction	
Name of Employer McDonald Hopkins LLC	Occupation Principal	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2250.00	

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. Mr. Jerome W. Cook Esq.
 Full Name (Last, First, Middle Initial)
 Mailing Address 5228 Kapok Drive
 City Medina State OH Zip Code 44256
 FEC ID number of contributing federal political committee. **C**
 Name of Employer McDonald Hopkins LLC Occupation Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 07 / 29 / 2014
Transaction ID : SA11AI.6811
 Amount of Each Receipt this Period 100.00
 Payroll Deduction

B. Mr. Jerome W. Cook Esq.
 Full Name (Last, First, Middle Initial)
 Mailing Address 5228 Kapok Drive
 City Medina State OH Zip Code 44256
 FEC ID number of contributing federal political committee. **C**
 Name of Employer McDonald Hopkins LLC Occupation Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 27 / 2014
Transaction ID : SA11AI.6875
 Amount of Each Receipt this Period 100.00
 Payroll Deduction

C. Mr. Jerome W. Cook Esq.
 Full Name (Last, First, Middle Initial)
 Mailing Address 5228 Kapok Drive
 City Medina State OH Zip Code 44256
 FEC ID number of contributing federal political committee. **C**
 Name of Employer McDonald Hopkins LLC Occupation Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 23 / 2014
Transaction ID : SA11AI.6915
 Amount of Each Receipt this Period 100.00
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 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)
McDonald Hopkins LLC PAC

A. Richard Cooper Esq.
Full Name (Last, First, Middle Initial)
Mailing Address 3644 Lattimore Road

City Shaker Hts.	State OH	Zip Code 44122
---------------------	-------------	-------------------

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

Name of Employer McDonald Hopkins LLC	Occupation Attorney
--	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **875.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		29		2014

Transaction ID : SA11AI.6812

Amount of Each Receipt this Period

125.00

Payroll Deduction

B. Richard Cooper Esq.
Full Name (Last, First, Middle Initial)
Mailing Address 3644 Lattimore Road

City Shaker Hts.	State OH	Zip Code 44122
---------------------	-------------	-------------------

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

Name of Employer McDonald Hopkins LLC	Occupation Attorney
--	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2014

Transaction ID : SA11AI.6876

Amount of Each Receipt this Period

125.00

Payroll Deduction

C. Richard Cooper Esq.
Full Name (Last, First, Middle Initial)
Mailing Address 3644 Lattimore Road

City Shaker Hts.	State OH	Zip Code 44122
---------------------	-------------	-------------------

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

Name of Employer McDonald Hopkins LLC	Occupation Attorney
--	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1125.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2014

Transaction ID : SA11AI.6916

Amount of Each Receipt this Period

125.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	375.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 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)
McDonald Hopkins LLC PAC

A. David Cupar
Full Name (Last, First, Middle Initial)

Mailing Address 33603 Hawkesbury Ct

City Avon State OH Zip Code 44011

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

Name of Employer McDonald Hopkins LLC Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1173.69**

Date of Receipt **07 / 29 / 2014**

Transaction ID : SA11AI.6813

Amount of Each Receipt this Period **167.67**

Payroll Deduction

B. David Cupar
Full Name (Last, First, Middle Initial)

Mailing Address 33603 Hawkesbury Ct

City Avon State OH Zip Code 44011

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

Name of Employer McDonald Hopkins LLC Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1341.36**

Date of Receipt **08 / 27 / 2014**

Transaction ID : SA11AI.6877

Amount of Each Receipt this Period **167.67**

Payroll Deduction

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

Mailing Address 33603 Hawkesbury Ct

City Avon State OH Zip Code 44011

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

Name of Employer McDonald Hopkins LLC Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1509.03**

Date of Receipt **09 / 23 / 2014**

Transaction ID : SA11AI.6917

Amount of Each Receipt this Period **167.67**

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ **503.01**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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

Full Name (Last, First, Middle Initial) A. Mr. James Dimitrijevs Esq.		Date of Receipt
Mailing Address 8460 Windsor Way		<input type="text" value="07"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City	State	Zip Code
Broadview Heights	OH	44147
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	Transaction ID : SA11AI.6814
McDonald Hopkins Co., L.P.A.	Attorney	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="875.00"/>	<input type="text" value="125.00"/>
		Payroll Deduction

Full Name (Last, First, Middle Initial) B. Mr. James Dimitrijevs Esq.		Date of Receipt
Mailing Address 8460 Windsor Way		<input type="text" value="08"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code
Broadview Heights	OH	44147
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	Transaction ID : SA11AI.6878
McDonald Hopkins Co., L.P.A.	Attorney	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1000.00"/>	<input type="text" value="125.00"/>
		Payroll Deduction

Full Name (Last, First, Middle Initial) C. Mr. James Dimitrijevs Esq.		Date of Receipt
Mailing Address 8460 Windsor Way		<input type="text" value="09"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City	State	Zip Code
Broadview Heights	OH	44147
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	Transaction ID : SA11AI.6918
McDonald Hopkins Co., L.P.A.	Attorney	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1125.00"/>	<input type="text" value="125.00"/>
		Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="375.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 17 OF 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 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)
McDonald Hopkins LLC PAC

Full Name (Last, First, Middle Initial)
A. Michael J Gabrail

Mailing Address 600 Superior Ave E
Suite 2100

City Cleveland State OH Zip Code 44114

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

Name of Employer McDonald Hopkins LLC Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
09 / 23 / 2014
Transaction ID : SA11AI.6919

Amount of Each Receipt this Period
1000.00

Payroll Deduction

Full Name (Last, First, Middle Initial)
B. Stephen Gross

Mailing Address 4254 Cherry Hill Drive

City Orchard Lake State MI Zip Code 48323

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

Name of Employer McDonald Hopkins LLC Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2919.00

Date of Receipt
07 / 29 / 2014
Transaction ID : SA11AI.6815

Amount of Each Receipt this Period
417.00

Payroll Deduction

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

Mailing Address 4254 Cherry Hill Drive

City Orchard Lake State MI Zip Code 48323

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

Name of Employer McDonald Hopkins LLC Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3336.00

Date of Receipt
08 / 27 / 2014
Transaction ID : SA11AI.6879

Amount of Each Receipt this Period
417.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	1834.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 46
	<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. Stephen Gross
 Full Name (Last, First, Middle Initial)
 Mailing Address 4254 Cherry Hill Drive
 City Orchard Lake State MI Zip Code 48323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer McDonald Hopkins LLC Occupation Attorney
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 3753.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2014
Transaction ID : SA11AI.6920
 Amount of Each Receipt this Period 417.00
 Payroll Deduction

B. Mr. David M. Kall Esq.
 Full Name (Last, First, Middle Initial)
 Mailing Address 1190 West Parkway Bl
 City Aurora State OH Zip Code 44202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer McDonald Hopkins LLC Occupation Attorney
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 2166.69

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2014
Transaction ID : SA11AI.6817
 Amount of Each Receipt this Period 166.67
 Payroll Deduction

C. Mr. David M. Kall Esq.
 Full Name (Last, First, Middle Initial)
 Mailing Address 1190 West Parkway Bl
 City Aurora State OH Zip Code 44202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer McDonald Hopkins LLC Occupation Attorney
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 2333.36

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 27 / 2014
Transaction ID : SA11AI.6881
 Amount of Each Receipt this Period 166.67
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	750.34
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. Mr. David M. Kall Esq.
Full Name (Last, First, Middle Initial)

Mailing Address 1190 West Parkway Bl

City Aurora State OH Zip Code 44202

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

Name of Employer McDonald Hopkins LLC Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.03

Date of Receipt 09 / 23 / 2014
Transaction ID : SA11AI.6922

Amount of Each Receipt this Period 166.67

Payroll Deduction

B. Richard N Kessler
Full Name (Last, First, Middle Initial)

Mailing Address 477 Thorngate Lane

City Riverwoods State IL Zip Code 60015

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

Name of Employer McDonald Hopkins LLC Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2916.69

Date of Receipt 07 / 29 / 2014
Transaction ID : SA11AI.6818

Amount of Each Receipt this Period 416.67

Payroll Deduction

C. Richard N Kessler
Full Name (Last, First, Middle Initial)

Mailing Address 477 Thorngate Lane

City Riverwoods State IL Zip Code 60015

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

Name of Employer McDonald Hopkins LLC Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3333.36

Date of Receipt 08 / 27 / 2014
Transaction ID : SA11AI.6882

Amount of Each Receipt this Period 416.67

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.01

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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

Full Name (Last, First, Middle Initial) A. Richard N Kessler		Date of Receipt MM / DD / YYYY 09 / 23 / 2014 Transaction ID : SA11AI.6923
Mailing Address 477 Thorngate Lane		Amount of Each Receipt this Period 416.67
City Riverwoods	State IL	Zip Code 60015
FEC ID number of contributing federal political committee. C		Payroll Deduction
Name of Employer McDonald Hopkins LLC	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3750.03	

Full Name (Last, First, Middle Initial) B. Edward H Kraus		Date of Receipt MM / DD / YYYY 07 / 29 / 2014 Transaction ID : SA11AI.6819
Mailing Address 600 Superior Ave E Suite 2100		Amount of Each Receipt this Period -100.00
City Cleveland	State OH	Zip Code 44114
FEC ID number of contributing federal political committee. C		Payroll Deduction
Name of Employer McDonald Hopkins LLC	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Michael Latiff		Date of Receipt MM / DD / YYYY 07 / 29 / 2014 Transaction ID : SA11AI.6820
Mailing Address 90 N. Deeplands		Amount of Each Receipt this Period 125.00
City Grosse Pointe Shor	State MI	Zip Code 48236
FEC ID number of contributing federal political committee. C		Payroll Deduction
Name of Employer McDonald Hopkins LLC	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 875.00	

SUBTOTAL of Receipts This Page (optional).....▶	441.67
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. Michael Latiff
Full Name (Last, First, Middle Initial)

Mailing Address 90 N. Deeplands

City Grosse Pointe Shor State MI Zip Code 48236

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

Name of Employer McDonald Hopkins LLC Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 27 / 2014

Transaction ID : SA11AI.6883

Amount of Each Receipt this Period
 125.00

Payroll Deduction

B. Michael Latiff
Full Name (Last, First, Middle Initial)

Mailing Address 90 N. Deeplands

City Grosse Pointe Shor State MI Zip Code 48236

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

Name of Employer McDonald Hopkins LLC Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2014

Transaction ID : SA11AI.6924

Amount of Each Receipt this Period
 125.00

Payroll Deduction

C. William O Lindow
Full Name (Last, First, Middle Initial)

Mailing Address 600 Superior Ave E Suite 2100

City Cleveland State OH Zip Code 44114

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

Name of Employer McDonald Hopkins LLC Occupation CFO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2014

Transaction ID : SA11AI.6821

Amount of Each Receipt this Period
 50.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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

Full Name (Last, First, Middle Initial) A. William O Lindow		Date of Receipt MM / DD / YYYY 08 / 27 / 2014 Transaction ID : SA11AI.6884
Mailing Address 600 Superior Ave E Suite 2100		Amount of Each Receipt this Period 50.00
City Cleveland	State OH	Zip Code 44114
FEC ID number of contributing federal political committee. C		Payroll Deduction
Name of Employer McDonald Hopkins LLC	Occupation CFO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. William O Lindow		Date of Receipt MM / DD / YYYY 09 / 23 / 2014 Transaction ID : SA11AI.6925
Mailing Address 600 Superior Ave E Suite 2100		Amount of Each Receipt this Period 50.00
City Cleveland	State OH	Zip Code 44114
FEC ID number of contributing federal political committee. C		Payroll Deduction
Name of Employer McDonald Hopkins LLC	Occupation CFO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. Mr. Dan L. Makee Esq.		Date of Receipt MM / DD / YYYY 07 / 29 / 2014 Transaction ID : SA11AI.6822
Mailing Address 324 Miner Road		Amount of Each Receipt this Period 100.00
City Highland Heights	State OH	Zip Code 44143
FEC ID number of contributing federal political committee. C		Payroll Deduction
Name of Employer McDonald Hopkins LLC	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. Mr. Dan L. Makee Esq.
Full Name (Last, First, Middle Initial)
Mailing Address 324 Miner Road

City Highland Heights	State OH	Zip Code 44143
--------------------------	-------------	-------------------

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

Name of Employer McDonald Hopkins LLC	Occupation Attorney
--	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	27	/	2014

Transaction ID : SA11AI.6885

Amount of Each Receipt this Period

100.00

Payroll Deduction

B. Mr. Dan L. Makee Esq.
Full Name (Last, First, Middle Initial)
Mailing Address 324 Miner Road

City Highland Heights	State OH	Zip Code 44143
--------------------------	-------------	-------------------

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

Name of Employer McDonald Hopkins LLC	Occupation Attorney
--	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2014

Transaction ID : SA11AI.6926

Amount of Each Receipt this Period

100.00

Payroll Deduction

C. Mr. Sean D. Malloy Esq.
Full Name (Last, First, Middle Initial)
Mailing Address 3422 Pelham Place

City Avon	State OH	Zip Code 44011
--------------	-------------	-------------------

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

Name of Employer McDonald Hopkins LLC	Occupation Attorney
--	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **875.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	29	/	2014

Transaction ID : SA11AI.6823

Amount of Each Receipt this Period

125.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<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

Full Name (Last, First, Middle Initial) A. Mr. Sean D. Malloy Esq.		Date of Receipt MM / DD / YYYY 08 / 27 / 2014 Transaction ID : SA11AI.6886
Mailing Address 3422 Pelham Place		Amount of Each Receipt this Period 125.00
City Avon	State OH	Zip Code 44011
FEC ID number of contributing federal political committee. C	Payroll Deduction	
Name of Employer McDonald Hopkins LLC	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Mr. Sean D. Malloy Esq.		Date of Receipt MM / DD / YYYY 09 / 23 / 2014 Transaction ID : SA11AI.6927
Mailing Address 3422 Pelham Place		Amount of Each Receipt this Period 125.00
City Avon	State OH	Zip Code 44011
FEC ID number of contributing federal political committee. C	Payroll Deduction	
Name of Employer McDonald Hopkins LLC	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1125.00	

Full Name (Last, First, Middle Initial) C. Mr. Michael J. Meaney Esq.		Date of Receipt MM / DD / YYYY 07 / 29 / 2014 Transaction ID : SA11AI.6824
Mailing Address 35157 Quartermane		Amount of Each Receipt this Period 125.00
City Bentleyville	State OH	Zip Code 44139
FEC ID number of contributing federal political committee. C	Payroll Deduction	
Name of Employer McDonald Hopkins LLC	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 875.00	

SUBTOTAL of Receipts This Page (optional).....▶	375.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 46
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
McDonald Hopkins LLC PAC

Full Name (Last, First, Middle Initial) A. Mr. Michael J. Meaney Esq.		Date of Receipt MM / DD / YYYY 08 / 27 / 2014
Mailing Address 35157 Quartermane		Transaction ID : SA11AI.6887
City Bentleyville	State OH	Zip Code 44139
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 125.00	
Name of Employer McDonald Hopkins LLC	Occupation Attorney	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Mr. Michael J. Meaney Esq.		Date of Receipt MM / DD / YYYY 09 / 23 / 2014
Mailing Address 35157 Quartermane		Transaction ID : SA11AI.6928
City Bentleyville	State OH	Zip Code 44139
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 125.00	
Name of Employer McDonald Hopkins LLC	Occupation Attorney	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1125.00	

Full Name (Last, First, Middle Initial) C. Mr. John Metzger Esq.		Date of Receipt MM / DD / YYYY 07 / 29 / 2014
Mailing Address 8396 Ironhorse Court		Transaction ID : SA11AI.6825
City West Palm Beach	State FL	Zip Code 33412
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 416.67	
Name of Employer McDonald Hopkins LLC	Occupation Attorney	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2916.69	

SUBTOTAL of Receipts This Page (optional).....▶	666.67
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. Mr. John Metzger Esq.
Full Name (Last, First, Middle Initial)
Mailing Address 8396 Ironhorse Court

City West Palm Beach	State FL	Zip Code 33412
-------------------------	-------------	-------------------

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

Name of Employer McDonald Hopkins LLC	Occupation Attorney
--	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3333.36

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	27	/	2014

Transaction ID : SA11AI.6888

Amount of Each Receipt this Period
416.67

Payroll Deduction

B. Mr. John Metzger Esq.
Full Name (Last, First, Middle Initial)
Mailing Address 8396 Ironhorse Court

City West Palm Beach	State FL	Zip Code 33412
-------------------------	-------------	-------------------

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

Name of Employer McDonald Hopkins LLC	Occupation Attorney
--	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3750.03

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2014

Transaction ID : SA11AI.6929

Amount of Each Receipt this Period
416.67

Payroll Deduction

C. John Mulligan
Full Name (Last, First, Middle Initial)
Mailing Address 20732 Sydenham Rd

City Shaker Heights	State OH	Zip Code 44122
------------------------	-------------	-------------------

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

Name of Employer McDonald Hopkins LLC	Occupation Attorney
--	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	29	/	2014

Transaction ID : SA11AI.6826

Amount of Each Receipt this Period
80.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....	913.34
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 27 OF 46
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
McDonald Hopkins LLC PAC

Full Name (Last, First, Middle Initial)
A. John Mulligan

Mailing Address 20732 Sydenham Rd

City State Zip Code
Shaker Heights OH 44122

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

Name of Employer Occupation
McDonald Hopkins LLC Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
560.00

Date of Receipt
 / /
 08 / 27 / 2014
Transaction ID : SA11AI.6889

Amount of Each Receipt this Period
80.00

Payroll Deduction

Full Name (Last, First, Middle Initial)
B. John Mulligan

Mailing Address 20732 Sydenham Rd

City State Zip Code
Shaker Heights OH 44122

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

Name of Employer Occupation
McDonald Hopkins LLC Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
640.00

Date of Receipt
 / /
 09 / 23 / 2014
Transaction ID : SA11AI.6930

Amount of Each Receipt this Period
80.00

Payroll Deduction

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

Mailing Address McDonald Hopkins LLC
300 North LaSalle St, Ste 2100

City State Zip Code
Chicago IL 60654

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

Name of Employer Occupation
McDonald Hopkins LLC Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
437.50

Date of Receipt
 / /
 07 / 29 / 2014
Transaction ID : SA11AI.6827

Amount of Each Receipt this Period
62.50

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 222.50

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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

Full Name (Last, First, Middle Initial) A. Owen Quinn		Date of Receipt MM / DD / YYYY 08 / 27 / 2014 Transaction ID : SA11AI.6890
Mailing Address McDonald Hopkins LLC 300 North LaSalle St, Ste 2100		Amount of Each Receipt this Period 62.50
City Chicago	State IL	Zip Code 60654
FEC ID number of contributing federal political committee. C		Payroll Deduction
Name of Employer McDonald Hopkins LLC	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Owen Quinn		Date of Receipt MM / DD / YYYY 09 / 23 / 2014 Transaction ID : SA11AI.6932
Mailing Address McDonald Hopkins LLC 300 North LaSalle St, Ste 2100		Amount of Each Receipt this Period 62.50
City Chicago	State IL	Zip Code 60654
FEC ID number of contributing federal political committee. C		Payroll Deduction
Name of Employer McDonald Hopkins LLC	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 562.50	

Full Name (Last, First, Middle Initial) C. Bruce Reinhart		Date of Receipt MM / DD / YYYY 07 / 29 / 2014 Transaction ID : SA11AI.6828
Mailing Address McDonald Hopkins LLC 505 South Flagler Dr, Ste 300		Amount of Each Receipt this Period 65.00
City West Palm Beach	State FL	Zip Code 33401
FEC ID number of contributing federal political committee. C		Payroll Deduction
Name of Employer McDonald Hopkins LLC	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

SUBTOTAL of Receipts This Page (optional).....▶	190.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. Bruce Reinhart
Full Name (Last, First, Middle Initial)

Mailing Address McDonald Hopkins LLC
505 South Flagler Dr, Ste 300

City West Palm Beach State FL Zip Code 33401

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

Name of Employer McDonald Hopkins LLC Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
455.00

Date of Receipt
08 / 27 / 2014
Transaction ID : SA11AI.6891

Amount of Each Receipt this Period
65.00

Payroll Deduction

B. Bruce Reinhart
Full Name (Last, First, Middle Initial)

Mailing Address McDonald Hopkins LLC
505 South Flagler Dr, Ste 300

City West Palm Beach State FL Zip Code 33401

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

Name of Employer McDonald Hopkins LLC Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
520.00

Date of Receipt
09 / 23 / 2014
Transaction ID : SA11AI.6933

Amount of Each Receipt this Period
65.00

Payroll Deduction

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

Mailing Address 737 Crandon Blvd
PH-1

City Key Biscayne State FL Zip Code 33149

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

Name of Employer McDonald Hopkins LLC Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4375.00

Date of Receipt
07 / 29 / 2014
Transaction ID : SA11AI.6829

Amount of Each Receipt this Period
625.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 755.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<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

Full Name (Last, First, Middle Initial) A. Raquel Rodriguez		Date of Receipt MM / DD / YYYY 08 / 27 / 2014 Transaction ID : SA11AI.6892
Mailing Address 737 Crandon Blvd PH-1		Amount of Each Receipt this Period 625.00
City Key Biscayne	State FL	Zip Code 33149
FEC ID number of contributing federal political committee. C	Name of Employer McDonald Hopkins LLC	Occupation Attorney
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	Payroll Deduction

Full Name (Last, First, Middle Initial) B. Raquel Rodriguez		Date of Receipt MM / DD / YYYY 09 / 23 / 2014 Transaction ID : SA11AI.6934
Mailing Address 737 Crandon Blvd PH-1		Amount of Each Receipt this Period 625.00
City Key Biscayne	State FL	Zip Code 33149
FEC ID number of contributing federal political committee. C	Name of Employer McDonald Hopkins LLC	Occupation Attorney
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5625.00	Payroll Deduction

Full Name (Last, First, Middle Initial) C. Scott Slaby		Date of Receipt MM / DD / YYYY 07 / 29 / 2014 Transaction ID : SA11AI.6830
Mailing Address McDonald Hopkins LLC 600 Superior Ave, E, Ste 2100		Amount of Each Receipt this Period 62.50
City Cleveland	State OH	Zip Code 44114
FEC ID number of contributing federal political committee. C	Name of Employer McDonald Hopkins LLC	Occupation Attorney
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 437.50	Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	1312.50
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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

Full Name (Last, First, Middle Initial)
A. Scott Slaby

Mailing Address McDonald Hopkins LLC
600 Superior Ave, E, Ste 2100

City Cleveland State OH Zip Code 44114

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

Name of Employer McDonald Hopkins LLC Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
08 / 27 / 2014
Transaction ID : SA11AI.6893

Amount of Each Receipt this Period
62.50

Payroll Deduction

Full Name (Last, First, Middle Initial)
B. Scott Slaby

Mailing Address McDonald Hopkins LLC
600 Superior Ave, E, Ste 2100

City Cleveland State OH Zip Code 44114

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

Name of Employer McDonald Hopkins LLC Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
562.50

Date of Receipt
09 / 23 / 2014
Transaction ID : SA11AI.6935

Amount of Each Receipt this Period
62.50

Payroll Deduction

Full Name (Last, First, Middle Initial)
C. Todd A Snitchler

Mailing Address 41 South High Street
Suite 1625

City Columbus State OH Zip Code 43215

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

Name of Employer McDonald Hopkins Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
07 / 29 / 2014
Transaction ID : SA11AI.6831

Amount of Each Receipt this Period
225.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 46
	<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. Todd A Snitchler
 Full Name (Last, First, Middle Initial)
 Mailing Address 41 South High Street
 Suite 1625
 City Columbus State OH Zip Code 43215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer McDonald Hopkins Occupation Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 08 / 27 / 2014
Transaction ID : SA11AI.6894
 Amount of Each Receipt this Period 225.00
 Payroll Deduction

B. Todd A Snitchler
 Full Name (Last, First, Middle Initial)
 Mailing Address 41 South High Street
 Suite 1625
 City Columbus State OH Zip Code 43215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer McDonald Hopkins Occupation Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt
 09 / 23 / 2014
Transaction ID : SA11AI.6936
 Amount of Each Receipt this Period 225.00
 Payroll Deduction

C. Mr. James Stief Esq.
 Full Name (Last, First, Middle Initial)
 Mailing Address 9977 Cottonwood Court
 City Mentor State OH Zip Code 44060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer McDonald Hopkins LLC Occupation Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2800.00

Date of Receipt
 07 / 29 / 2014
Transaction ID : SA11AI.6832
 Amount of Each Receipt this Period 400.00
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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

Full Name (Last, First, Middle Initial) A. Mr. James Stief Esq.		Date of Receipt MM / DD / YYYY 08 / 27 / 2014 Transaction ID : SA11AI.6895
Mailing Address 9977 Cottonwood Court		Amount of Each Receipt this Period 400.00
City Mentor	State OH	Zip Code 44060
FEC ID number of contributing federal political committee. C	Payroll Deduction	
Name of Employer McDonald Hopkins LLC	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3200.00	

Full Name (Last, First, Middle Initial) B. Mr. James Stief Esq.		Date of Receipt MM / DD / YYYY 09 / 23 / 2014 Transaction ID : SA11AI.6937
Mailing Address 9977 Cottonwood Court		Amount of Each Receipt this Period 400.00
City Mentor	State OH	Zip Code 44060
FEC ID number of contributing federal political committee. C	Payroll Deduction	
Name of Employer McDonald Hopkins LLC	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3600.00	

Full Name (Last, First, Middle Initial) C. Mr. Michael W. Wise Esq.		Date of Receipt MM / DD / YYYY 07 / 29 / 2014 Transaction ID : SA11AI.6833
Mailing Address 1109 Royal Oak		Amount of Each Receipt this Period 125.00
City Chagrin Falls	State OH	Zip Code 44022
FEC ID number of contributing federal political committee. C	Payroll Deduction	
Name of Employer McDonald Hopkins LLC	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 875.00	

SUBTOTAL of Receipts This Page (optional).....▶	925.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 34 OF 46
(check only one)

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

A. Mr. Michael W. Wise Esq.
Full Name (Last, First, Middle Initial)
Mailing Address 1109 Royal Oak

City Chagrin Falls	State OH	Zip Code 44022
-----------------------	-------------	-------------------

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

Name of Employer McDonald Hopkins LLC	Occupation Attorney
--	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	27	/	2014

Transaction ID : SA11AI.6896

Amount of Each Receipt this Period
125.00

Payroll Deduction

B. Mr. Michael W. Wise Esq.
Full Name (Last, First, Middle Initial)
Mailing Address 1109 Royal Oak

City Chagrin Falls	State OH	Zip Code 44022
-----------------------	-------------	-------------------

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

Name of Employer McDonald Hopkins LLC	Occupation Attorney
--	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1125.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2014

Transaction ID : SA11AI.6938

Amount of Each Receipt this Period
125.00

Payroll Deduction

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) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	16176.54

**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"/> 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 checked="" 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)
McDonald Hopkins LLC PAC

Full Name (Last, First, Middle Initial)

A. Citizens for Amstutz

Mailing Address 4456 Wood Lake Trail

City Wooster State OH Zip Code 44691

Purpose of Disbursement

011

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 21 / 2014

Transaction ID : SB29.6862

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Citizens for Bill Beagle

Mailing Address 115 S. Tippecanoe Drive

City Tipp City State OH Zip Code 45371

Purpose of Disbursement

011

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 22 / 2014

Transaction ID : SB29.6905

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. Citizens for Buchy

Mailing Address 2191 Oak Street

City Maria Stein State OH Zip Code 45860

Purpose of Disbursement

011

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 21 / 2014

Transaction ID : SB29.6852

Amount of Each Disbursement this Period

1000.00

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

2250.00

TOTAL 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"/> 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 checked="" 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)
McDonald Hopkins LLC PAC

Full Name (Last, First, Middle Initial)

A. Citizens for Hottinger

Mailing Address 894 Jonathan Lane

City Newark State OH Zip Code 43055

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6864

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Citizens for Kevin Bacon

Mailing Address 5325 Ponderosa Drive

City Columbus State OH Zip Code 43231

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6856

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Citizens for Mike Dovilla

Mailing Address 62 Harnagy Street

City Berea State OH Zip Code 44017

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6867

Amount of Each Disbursement this Period

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

TOTAL 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"/> 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 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. Citizens for Stephanie Kunze

Mailing Address 865 Macon Alley

City Columbus State OH Zip Code 43206

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

011
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 22 / 2014

Transaction ID : SB29.6906

Amount of Each Disbursement this Period

400.00

Full Name (Last, First, Middle Initial)

B. Citizens for Stinziano

Mailing Address 550 E. Walnut Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

011
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2014

Transaction ID : SB29.6853

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. Committee for Judge O'Donnell

Mailing Address 260 N. Cassady Ave.

City Columbus State OH Zip Code 43209

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

011
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 17 / 2014

Transaction ID : SB29.6901

Amount of Each Disbursement this Period

500.00

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

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

1150.00

**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"/> 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 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. Committee to Elect Cliff Rosenberger

Mailing Address P.O. Box 343

City State Zip Code
Clarksville OH 45113

Purpose of Disbursement

011
Category/
Type

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2014

Transaction ID : SB29.6855

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Committee to Elect Jeff McClain

Mailing Address 428 South Sandusky

City State Zip Code
Upper Sandusky OH 43351

Purpose of Disbursement

011
Category/
Type

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2014

Transaction ID : SB29.6849

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Committee to Elect Manning

Mailing Address 5380 Barton Road

City State Zip Code
North Ridgeville OH 44039

Purpose of Disbursement

011
Category/
Type

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2014

Transaction ID : SB29.6863

Amount of Each Disbursement this Period

1000.00

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

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

4000.00

**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"/> 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 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. Committee to Elect Sean J. O'Brien

Mailing Address P.O. Box 9

City Brookfield State OH Zip Code 44403

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6846

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Friends of Armond Budish

Mailing Address 23240 Chargin Blvd, Ste 700

City Beachwood State OH Zip Code 44122

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6861

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Friends of Faber

Mailing Address 7706 St. Rt. 703

City Celina State OH Zip Code 45822

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6800

Amount of Each Disbursement this Period

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

TOTAL 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"/> 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 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 Faber

Mailing Address 7706 St. Rt. 703

City State Zip Code
Celina OH 45822

Purpose of Disbursement

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2014

Transaction ID : SB29.6859

Amount of Each Disbursement this Period

1100.00

Full Name (Last, First, Middle Initial)

B. Friends of Gary Scherer

Mailing Address PO Box 123

City State Zip Code
Circleville OH 43113

Purpose of Disbursement

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2014

Transaction ID : SB29.6850

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Friends of Jack Schron

Mailing Address 6479 Brecksville Road

City State Zip Code
Independence OH 44131

Purpose of Disbursement

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2014

Transaction ID : SB29.6847

Amount of Each Disbursement this Period

1000.00

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

2600.00

TOTAL 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"/> 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 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 Joe Schiavoni for State Senate

Mailing Address 87 West Chester Drive

City Youngstown State OH Zip Code 44515

Purpose of Disbursement

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2014

Transaction ID : SB29.6845

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. Friends of Kevin Kelley

Mailing Address 5904 Parkridge Avenue

City Cleveland State OH Zip Code 44144

Purpose of Disbursement

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : SB29.6939

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Friends of Leland

Mailing Address 367 East Broad Street
Suite 1002

City Columbus State OH Zip Code 43215

Purpose of Disbursement

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2014

Transaction ID : SB29.6844

Amount of Each Disbursement this Period

250.00

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

1000.00

TOTAL 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"/> 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 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 Margy Conditt

Mailing Address 6959 Rock Springs Drive

City State Zip Code
Liberty Township OH 45011

Purpose of Disbursement

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2014

Transaction ID : **SB29.6851**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Friends of Marlene B. Anielski

Mailing Address 5954 Briardale Lane

City State Zip Code
Solon OH 44139

Purpose of Disbursement

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 07 / 2014

Transaction ID : **SB29.6799**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Friends of Nan Baker

Mailing Address 29761 Devonshire Oval

City State Zip Code
Westlake OH 44145

Purpose of Disbursement

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2014

Transaction ID : **SB29.6858**

Amount of Each Disbursement this Period

500.00

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

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

1500.00

**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"/> 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 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 Ryan Smith

Mailing Address 1661 Kemper Hollow Road

City Gallipolis State OH Zip Code 45631

Purpose of Disbursement

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 07 / 2014

Transaction ID : SB29.6798

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Friends of Tim J. DeGeeter

Mailing Address 7501 Trevor Lane

City Parma State OH Zip Code 44129

Purpose of Disbursement

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2014

Transaction ID : SB29.6860

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. JP Morgan Chase Bank

Mailing Address 1300 East Ninth Street
Suite 1300

City Cleveland State OH Zip Code 44114

Purpose of Disbursement
Account Analysis Fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 24 / 2014

Transaction ID : SB29.6801

Amount of Each Disbursement this Period

141.40

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

1641.40

TOTAL 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"/> 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 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. Martin County Residents for Tax Fairness, Inc.

Mailing Address 2840 SW Bear Paw Trail

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	3		2	0	1	4

City State Zip Code
Palm City FL 34990

Transaction ID : SB29.6835

Purpose of Disbursement

011
Category/ Type

Amount of Each Disbursement this Period

1000.00

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. Ohio House Republican Organizational Committee

Mailing Address 4679 Winterest Drive

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	1		2	0	1	4

City State Zip Code
Columbus OH 43204

Transaction ID : SB29.6854

Purpose of Disbursement

011
Category/ Type

Amount of Each Disbursement this Period

1000.00

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. Seitz for Senate Committee

Mailing Address 4401 Abby Court

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	1		2	0	1	4

City State Zip Code
Cincinnati OH 45201

Transaction ID : SB29.6866

Purpose of Disbursement

011
Category/ Type

Amount of Each Disbursement this Period

1000.00

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

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

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

3000.00

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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 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 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. The Committee to Elect Chris Widener

Mailing Address 23 South Center Street

City Springfield State OH Zip Code 45502

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6865

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. The Committee to Elect M. McMonagle Judge

Mailing Address 1221 Charter Oak Lane

City Westlake State OH Zip Code 44145

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6899

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. The Republican Senate Campaign Committee

Mailing Address 4679 Winterset Drive

City Columbus State OH Zip Code 43220

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6857

Amount of Each Disbursement this Period

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

TOTAL 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"/> 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 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. Yost for Auditor

Mailing Address 4679 Winterset Drive

City Columbus State OH Zip Code 43220

Purpose of Disbursement

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 22 / 2014

Transaction ID : SB29.6904

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

500.00

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

27941.40