Fax Cover Sheet

Hunter, Carnahan, Shoub, Byard & Harshman

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From: Cathrine Harshman
Date: September 24, 2012
Total pages, including cover:
:

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FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

o Be Used by Persons (Other than Political Committees) including Qualified Nonp 1. (a) Name of Individual, Organization on Colpolation SEIU DISTIZT 1/199 PC &	
(b) Address (number and street) — check if different than previously reported 13 9 5 Dublim Red	
(c) City, State and ZIP Code	3. FEC Identification Number
alumbrus OH 43215	
Corporate filers only Is the filer a qualified nonprofit corporation?	C C
Individual filers only Name of Employer	Occupation
4. TYPE OF REPORT (check appropriate boxes):	
(a) April 15 Quarterly Report	
July 15 Quarterly Report	
October 15 Quarterly Report	
January 31 Year-End Report	
b) Is this Report an amendment? Yes No 14 5. COVERING PERIOD: FROM 09 20 20 2 THROUGH	
01 24 2012	
6. TOTAL CONTRIBUTIONS	/ 18.95
7. TOTAL INDEPENDENT EXPENDITURES	, , //8.95
tider penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, con ggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent rein were made by a corporation) I certify that the corporation is a qualified nonprofit corporation under the Comm	. In addition, (if the independent expenditures reporte
PE OR PRINT NAME OF PERSON COMPLETING FORM SIGNATURE	DATE
Cathrine Hershman /aft	7.24.16
NOTE: Submission of false, eneneous or incomplete information may subject the person slyning this	eport to the penalties of 2 U.S.C. §437g.

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20483 Toll Free 800-424-9530, Local 202-694-1100

FEC Schedule 5 (REV. 09/2005)

SCHEDUL	E	5-/	1	
ITEMIZED	R	EC	EIF	PTS

SCHEDULE 3-A						
ITEMIZED RECEIPTS					PAGE	OF
Any information copied from such Report for commercial purposes, other than						
NAME OF FILER (In Full)						
SELU Distric						
A. Full Name (Last, First, Middle Initial) SEIV District	1199 (trans A	in of dues))	Date of Receipt		
Mailing Address 1395 Ovblh	Rd			09 20	20	12
City Blumbus	State OH	Zip Code 43206		Amount of Each R	eceipt this Per	ìod
FEC ID number of contributing federal political committee.	С			,	,//	8.95
Name of Employer			Occupation			
B. Full Name (Last, First, Middle Initial)				Date of Receipt		
Mailing Address				у м / о в	، ۲۷ ،	r . Y
City	State	Zip Code		Amount of Each Re	eceipt this Peri	
FEC ID number of contributing federal political committee.	С			,	.7	· .
Name of Employer			Occupation			· · · ·
C. Full Name (Last, First, Middle Initial)				Date of Receipt		
Mailing Address				m m to b	, y y y	· *
City	State	Zip Code		Amount of Each Re	ceipt this Peric	od .
FEC ID number of contributing federal political committee.	С	·		,	,	
Name of Employer			Occupation			
D. Fuil Name (Last, First, Middle Initial)			1			
Mailing Address				Date of Receipt		¥
City	State	Zip Code		Annual of Posts Day	-1-4 447- 19-4-	
FEC ID number of contributing federal political committee.	С			Amount of Each Rec	elpt this Peno	
Name of Employer			Occupation		<u> </u>	
OURTONAL of Parallel Toll Parallel				 	// 0	9 <
SUBTOTAL of Receipts This Page (opt				1	,/18 ,/18	. • • > • •
TOTAL This Period (last page carry total	u to line 6)		······		, , , , 0	·

5PG021

FEC Schedule 5 (Rev. 02/2003)

SEP-24-2012 10:43

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CHEDULE 5-E EMIZED INDEPENDENT EXPENDITURES		PAGE OF FORM 5
SE 10 District 1199 PCE		
Full Name (Last, First, Middle Initial) of Payee		Date
NGP VAN Inc		
Mailing Address		04 28 20 13
City Some State Some ille mA		Amount
City State	Zip Code	, , , 118.95
Somewife mA	62144	, , , , , , , , , , , , , , , , , , , ,
Purpose of Expenditure	Category/ Type	Office Sought: House State:
Name of Federal Candidate Supported or Opposed by Exp	anditure.	President District:
Barack Oboma	, restar o	Check One: Support Oppuse
Calendar Year-To-Date Per Election for Office Sought	16,757.77	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee		
Pull Manie (Last, Film, Middle Insulp) of Payor		Date
Mailing Address		
		Amount
City State	Zip Code	, ,
Purpose of Expenditure	Category/	Office Sought: House State:
	Туре	Senate Oistrict:
Name of Federal Candidate Supported or Opposed by Expe	nditure:	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	1 *	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee		Date
		M M ; D D ; V Y Y Y
Mailing Address		
		Amount
City State	Zip Code	, , .
Purpose of Experiditure	Category/ Type	Office Sought: House State:
Name of Endom) Condidate Connected or Connected To		Senate District:
Name of Federal Candidate Supported or Opposed by Exper	Kuri(e:	Check One: Support Oppose
Calcular Vanc To Date Box Planton		Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought	,	Other (specify)
a) SUBTOTAL of Itemized Independent Expenditures		, ,118.95 , , 0.
b) SUBTOTAL of Uniternized Independent Expenditures		, , <i>o</i> .
c) TOTAL Independent Expenditures(carry total from last page forward to Line 7)		, 118.95

5PG021

FEC Schedule 5 (Rev. 02/2003)

Federal Election Commission ENVELOPE REPLACEMENT PAGE

FOR INCOMING DOCUMENTS

The FEC added this page to the end of this himg to indicate his	ow it was received.			
Hand Delivered	Date of Receipt			
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USPS Express Mail	Postmarked			
Postmark Illegible				
No Postmark				
Overnight Delivery Service (Specify):	Shipping Date			
Received from House Records & Registration Office	Date of Receipt			
Received from Senate Public Records Office	Date of Receipt			
Received from Electronic Filing Office	Date of Receipt			
Other (Specify):	ceipt or Postmarked			
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N/A PREPARER (5/2004)	N/A DATE PREPARED			