

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 America's Tomorrow

ADDRESS (number and street) PO Box 117 Marietta OH 45750 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE C C00681478 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X]

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31 Year-End Report (YE) [X], July 31 Mid-Year Report (Non-election Year Only) (MY), Termination Report (TER). (b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11) (Non-Election Year Only), Dec 20 (M12) (Non-Election Year Only), 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 [State]. (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S). Election on [MM/DD/YYYY] in the State of [State].

5. Covering Period 07 / 01 / 2019 through 12 / 31 / 2019

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

Signature of Treasurer Locke, David, S, Mr., [Electronically Filed] Date 01 / 31 / 2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

America's Tomorrow

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="2019"/>		<input type="text" value="1600.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="1600.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="133109.00"/>	<input type="text" value="133109.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="134709.00"/>	<input type="text" value="134709.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="130593.00"/>	<input type="text" value="130593.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="4116.00"/>	<input type="text" value="4116.00"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="150.00"/>	

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

America's Tomorrow

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).....	133109.00	133109.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	133109.00	133109.00
(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)	133109.00	133109.00
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)).....▶	133109.00	133109.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	133109.00	133109.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	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	0.00
24. Independent Expenditures (use Schedule E)	112963.00	112963.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	17630.00	17630.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	130593.00	130593.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	130593.00	130593.00

DETAILED SUMMARY PAGE
of Disbursements

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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)	133109.00	133109.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	133109.00	133109.00
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 12
	<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)
America's Tomorrow

A. Patriot Land Company, LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7716 Depot Rd Unit 1
 City Lisbon State OH Zip Code 44432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50109.00

Date of Receipt 08 / 02 / 2019
Transaction ID : SA11AI.4137
 Amount of Each Receipt this Period 50109.00
 Memo Item Contribution

B. Patriot Land Company, LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7716 Depot Rd Unit 1
 City Lisbon State OH Zip Code 44432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 133109.00

Date of Receipt 09 / 27 / 2019
Transaction ID : SA11AI.4141
 Amount of Each Receipt this Period 83000.00
 Memo Item Contribution

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

Date of Receipt
 Amount of Each Receipt this Period
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	133109.00
TOTAL This Period (last page this line number only).....	133109.00

**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"/> 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)
America's Tomorrow

Full Name (Last, First, Middle Initial) A. CL Brunton Properties LTD		Date of Disbursement MM / DD / YYYY 11 / 25 / 2019
Mailing Address 118 2nd St		FEC Identification Number C [REDACTED] Transaction ID : SB29.4154 Amount of Each Disbursement this Period 1600.00
City Marietta	State OH	Zip Code 45750
Purpose of Disbursement Rent	Category/Type [REDACTED]	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. David Locke and Associates LLC		Date of Disbursement MM / DD / YYYY 08 / 06 / 2019
Mailing Address PO Box 117		FEC Identification Number C [REDACTED] Transaction ID : SB29.4146 Amount of Each Disbursement this Period 2000.00
City Marietta	State OH	Zip Code 45750
Purpose of Disbursement accounting	Category/Type [REDACTED]	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. David Locke and Associates LLC		Date of Disbursement MM / DD / YYYY 09 / 05 / 2019
Mailing Address PO Box 117		FEC Identification Number C [REDACTED] Transaction ID : SB29.4147 Amount of Each Disbursement this Period 4000.00
City Marietta	State OH	Zip Code 45750
Purpose of Disbursement accounting	Category/Type [REDACTED]	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

7600.00

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"/> 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)
America's Tomorrow

A. David Locke and Associates LLC

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 117

City Marietta State OH Zip Code 45750

Purpose of Disbursement accounting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 17 / 2019

FEC Identification Number: C

Transaction ID : SB29.4148

Amount of Each Disbursement this Period: 2000.00

Memo Item

B. David Locke and Associates LLC

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 117

City Marietta State OH Zip Code 45750

Purpose of Disbursement accounting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 06 / 2019

FEC Identification Number: C

Transaction ID : SB29.4149

Amount of Each Disbursement this Period: 1500.00

Memo Item

C. Frost Brown

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 5716

City Cincinnati State OH Zip Code 45201

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 13 / 2019

FEC Identification Number: C

Transaction ID : SB29.4152

Amount of Each Disbursement this Period: 5000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 8500.00

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"/> 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)
America's Tomorrow

Full Name (Last, First, Middle Initial) A. Ken Miller		Date of Disbursement MM / DD / YYYY 09 / 17 / 2019	
Mailing Address 910 Caywood Rd		FEC Identification Number C [] Transaction ID : SB29.4151 Amount of Each Disbursement this Period [] 500.00	
City Marietta	State OH	Zip Code 45750	Category/ Type []
Purpose of Disbursement board member			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Wayne, Catherine, , ,		Date of Disbursement MM / DD / YYYY 10 / 07 / 2019	
Mailing Address 535 3rd Street		FEC Identification Number C [] Transaction ID : SB29.4150 Amount of Each Disbursement this Period [] 1000.00	
City Marietta	State OH	Zip Code 45750	Category/ Type []
Purpose of Disbursement Board member			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

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

SUBTOTAL of Disbursements This Page (optional).....▶	[] 1500.00
TOTAL This Period (last page this line number only).....▶	[] 17600.00

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **America's Tomorrow** Transaction ID : **SC/10.4099**

LOAN SOURCE Full Name (Last, First, Middle Initial) Locke, David, S, Mr., N <input type="checkbox"/> Memo Item		Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 515 Tupper St		
City Marietta	State OH	

Original Amount of Loan <input type="text" value="100.00"/>	Cumulative Payment To Date <input type="text" value="0.00"/>	Balance Outstanding at Close of This Period <input type="text" value="100.00"/>
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TERMS

Date Incurred <input type="text" value="06"/> / <input type="text" value="26"/> / <input type="text" value="2018"/>	Date Due <input type="text" value="9/1/2018"/>	Interest Rate <input type="text" value="5.00"/> % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)	<input type="text" value="100.00"/>
TOTALS This Period (last page in this line only)	<input type="text"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **America's Tomorrow** Transaction ID : **SC/10.4130**

LOAN SOURCE Full Name (Last, First, Middle Initial) Locke, David, S, Mr., N <input type="checkbox"/> Memo Item		Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 515 Tupper St		
City Marietta	State OH	

Original Amount of Loan <input type="text" value="50.00"/>	Cumulative Payment To Date <input type="text" value="0.00"/>	Balance Outstanding at Close of This Period <input type="text" value="50.00"/>
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TERMS

Date Incurred <input type="text" value="11"/> / <input type="text" value="19"/> / <input type="text" value="2018"/>	Date Due <input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2018"/>	Interest Rate <input type="text" value="5.00"/> % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)	<input type="text" value="50.00"/>
TOTALS This Period (last page in this line only)	<input type="text" value="150.00"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) America's Tomorrow	FEC IDENTIFICATION NUMBER ▼ C C00681478
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item Capital Promotions		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address Main Street		Amount <input type="text"/>	
City New Castle	State PA	Zip Code 16101	Transaction ID : SE.4144
Purpose of Expenditure Yard Signs		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Law, Randy, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: OH
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item Communications Counsel Inc		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 37 W Broad St Suite 325		Amount <input type="text"/>	
City Columbus	State OH	Zip Code 43215	Transaction ID : SE.4142
Purpose of Expenditure Independent Expenditure		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Law, Randy, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: OH
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Locke, David, S, Mr.,

[Electronically Filed]

Date

/ /

Signature