

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
CINCINNATI BELL INC FEDERAL PAC

ADDRESS (number and street) 221 E FOURTH STREET
(103-1280)
 Check if different than previously reported. (ACC)
CINCINNATI OH 45202

2. **FEC IDENTIFICATION NUMBER** C00087478
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 Quarterly 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 (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 04 01 2010 through 04 30 2010

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 KIMBERLY SHEEHY

Signature of Treasurer Electronically Filed by KIMBERLY SHEEHY Date 05 06 2010

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

Office Use Only									
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FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
CINCINNATI BELL INC FEDERAL PAC

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		7601.63
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	9861.99									
(c) Total Receipts (from Line 19)	1308.80	6019.16								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	11170.79	13620.79								
7. Total Disbursements (from Line 31)	5350.00	7800.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	5820.79	5820.79								
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
CINCINNATI BELL INC FEDERAL PAC

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	1	0

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)	534.66	1263.04
(ii) Unitemized	774.14	4756.12
(iii) TOTAL (add Lines 11(a)(i) and (ii)	1308.80	6019.16
(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)	1308.80	6019.16
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 Transfer (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))	1308.80	6019.16
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	1308.80	6019.16

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	1500.00	1500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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.....	3850.00	6300.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	5350.00	7800.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5350.00	7800.00

DETAILED SUMMARY PAGE
of Disbursements

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)	1308.80	6019.16
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1308.80	6019.16
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 / 15
	<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)
CINCINNATI BELL INC FEDERAL PAC

A.	Full Name (Last, First, Middle Initial) CHARLES R BURKE		Date of Receipt
	Mailing Address 7376 WALLINGFORD DR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 04 / 10 / 2010
	City	State	Zip Code
	CINCINNATI	OH	45244
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer CINCINNATI BELL INC.		Occupation VP - INFORMATION TECHNOL	Transaction ID: B003149S000009L11A1
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text"/> 38.65
		<input type="text"/> 347.85	PAYROLL DEDUCTION

B.	Full Name (Last, First, Middle Initial) CHARLES R BURKE		Date of Receipt
	Mailing Address 7376 WALLINGFORD DR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 04 / 24 / 2010
	City	State	Zip Code
	CINCINNATI	OH	45244
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer CINCINNATI BELL INC.		Occupation VP - INFORMATION TECHNOL	Transaction ID: B003150S000009L11A1
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text"/> 38.65
		<input type="text"/> 347.85	PAYROLL DEDUCTION

C.	Full Name (Last, First, Middle Initial) GARY A CORNETT		Date of Receipt
	Mailing Address 24 MARCEL CT		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 04 / 10 / 2010
	City	State	Zip Code
	FAIRFIELD	OH	45014
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer CINCINNATI BELL INC.		Occupation VP-PURCHASING/SUPPLY CHA	Transaction ID: B003149S000013L11A1
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text"/> 44.13
		<input type="text"/> 391.15	PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 121.43
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: PAGE 7 / 15
(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)
CINCINNATI BELL INC FEDERAL PAC

A.

Full Name (Last, First, Middle Initial)
GARY A CORNETT

Mailing Address 24 MARCEL CT

City State Zip Code
FAIRFIELD OH 45014

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

Name of Employer Occupation
CINCINNATI BELL INC. VP-PURCHASING/SUPPLY CHA

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 391.15

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 4 / 2 0 1 0

Transaction ID: B003150S000013L11A1

Amount of Each Receipt this Period
44.13

PAYROLL DEDUCTION

B.

Full Name (Last, First, Middle Initial)
KURT A FREYBERGER

Mailing Address 30 LINDEN AVE

City State Zip Code
FT THOMAS KY 41075

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

Name of Employer Occupation
CINCINNATI BELL INC. VP & CONTROLLER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 383.13

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 0 / 2 0 1 0

Transaction ID: B003147S000004L11A1

Amount of Each Receipt this Period
48.83

PAYROLL DEDUCTION

C.

Full Name (Last, First, Middle Initial)
KURT A FREYBERGER

Mailing Address 30 LINDEN AVE

City State Zip Code
FT THOMAS KY 41075

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

Name of Employer Occupation
CINCINNATI BELL INC. VP & CONTROLLER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 383.13

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 4 / 2 0 1 0

Transaction ID: B003148S000004L11A1

Amount of Each Receipt this Period
31.41

PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional) ► **124.37**

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: <input 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	PAGE 8 / 15
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NAME OF COMMITTEE (In Full)
CINCINNATI BELL INC FEDERAL PAC

A.	Full Name (Last, First, Middle Initial) MYRA K KAYS	Date of Receipt MM / DD / YYYY 04 / 10 / 2010
	Mailing Address 7831 MONTREAL COURT	Transaction ID: B003147S000005L11A1
	City State Zip Code CINCINNATI OH 45241	Amount of Each Receipt this Period 25.38
	FEC ID number of contributing federal political committee. C	PAYROLL DEDUCTION
	Name of Employer Occupation CINCINNATI BELL INC. SPECIAL ASST TO THE PRES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 228.42	

B.	Full Name (Last, First, Middle Initial) MYRA K KAYS	Date of Receipt MM / DD / YYYY 04 / 24 / 2010
	Mailing Address 7831 MONTREAL COURT	Transaction ID: B003148S000005L11A1
	City State Zip Code CINCINNATI OH 45241	Amount of Each Receipt this Period 25.38
	FEC ID number of contributing federal political committee. C	PAYROLL DEDUCTION
	Name of Employer Occupation CINCINNATI BELL INC. SPECIAL ASST TO THE PRES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 228.42	

C.	Full Name (Last, First, Middle Initial) BRIAN G KEATING	Date of Receipt MM / DD / YYYY 04 / 10 / 2010
	Mailing Address 2521 SALEM ST	Transaction ID: B003147S000006L11A1
	City State Zip Code CINCINNATI OH 45208	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	PAYROLL DEDUCTION
	Name of Employer Occupation CINCINNATI BELL VP - HR & ADMINISTRATION	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional)	75.76
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 9 / 15
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CINCINNATI BELL INC FEDERAL PAC

A. Full Name (Last, First, Middle Initial)
BRIAN G KEATING

Mailing Address 2521 SALEM ST

City State Zip Code
CINCINNATI OH 45208

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

Name of Employer Occupation
CINCINNATI BELL VP - HR & ADMINISTRATION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
04 / 24 / 2010

Transaction ID: B003148S000006L11A1

Amount of Each Receipt this Period
25.00

PAYROLL DEDUCTION

B. Full Name (Last, First, Middle Initial)
YVONNE C LESICKO

Mailing Address 1168 ROCKPORT COURT

City State Zip Code
COLUMBUS OH 43235

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

Name of Employer Occupation
CINCINNATI BELL INC. DIR - STATE LOBBYIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 304.60

Date of Receipt
MM / DD / YYYY
04 / 10 / 2010

Transaction ID: B003149S0000035L11A1

Amount of Each Receipt this Period
34.63

PAYROLL DEDUCTION

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

Mailing Address 1168 ROCKPORT COURT

City State Zip Code
COLUMBUS OH 43235

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

Name of Employer Occupation
CINCINNATI BELL INC. DIR - STATE LOBBYIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 304.60

Date of Receipt
MM / DD / YYYY
04 / 24 / 2010

Transaction ID: B003150S0000034L11A1

Amount of Each Receipt this Period
34.63

PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional) ► **94.26**

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 / 15
	(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)
CINCINNATI BELL INC FEDERAL PAC

A.

Full Name (Last, First, Middle Initial) CHRISTOPHER J WILSON		Date of Receipt MM / DD / YYYY 04 / 10 / 2010
Mailing Address 598 RIVERSHORE DRIVE		Transaction ID: B003147S000011L11A1
City HEBRON	State KY	
Zip Code 41048	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 59.42
Name of Employer CINCINNATI BELL INC.	Occupation VP & GENERAL COUNSEL	PAYROLL DEDUCTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 534.78	

B.

Full Name (Last, First, Middle Initial) CHRISTOPHER J WILSON		Date of Receipt MM / DD / YYYY 04 / 24 / 2010
Mailing Address 598 RIVERSHORE DRIVE		Transaction ID: B003148S000011L11A1
City HEBRON	State KY	
Zip Code 41048	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 59.42
Name of Employer CINCINNATI BELL INC.	Occupation VP & GENERAL COUNSEL	PAYROLL DEDUCTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 534.78	

SUBTOTAL of Receipts This Page (optional)	118.84
TOTAL This Period (last page this line number only)	534.66

**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)

PAGE 11 / 15

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CINCINNATI BELL INC FEDERAL PAC

A. Full Name (Last, First, Middle Initial) SCHMIDT FOR CONGRESS COMMITTEE Mailing Address P.O. BOX 867 City MILFORD State OH Zip Code 45150 Purpose of Disbursement FUNDRAISER Candidate Name JEAN SCHMIDT Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 02 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B003159S000001L23 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00 Category/Type 011
B. Full Name (Last, First, Middle Initial) ZACK SPACE FOR CONGRESS Mailing Address P.O. BOX 75214 City WASHINGTON State DC Zip Code 20013 Purpose of Disbursement FUNDRAISER Candidate Name ZACK SPACE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 18 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B003159S000002L23 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 500.00 Category/Type 011

SUBTOTAL of Disbursements This Page (optional) ►

1500.00

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)

PAGE 12 / 15

<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)
CINCINNATI BELL INC FEDERAL PAC

A. Full Name (Last, First, Middle Initial) FRIENDS OF DAVID DANIELS <hr/> Mailing Address 440 NORTH STREET <hr/> City GREENFIELD State OH Zip Code 45123 <hr/> Purpose of Disbursement FUNDRAISER Candidate Name DAVID DANIELS <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 17 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B003155S000001L29 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 1 0
	Amount of Each Disbursement this Period 400.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) FRIENDS OF TIM DEGEETER <hr/> Mailing Address 2700 TUXEDO AVENUE <hr/> City PARMA State OH Zip Code 44134 <hr/> Purpose of Disbursement FUNDRAISER Candidate Name TIM DEGEETER <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 15 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B003156S000002L29 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 1 0
	Amount of Each Disbursement this Period 250.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT BILL HARRIS <hr/> Mailing Address 1238 TOWNSHIP ROAD, #1506 <hr/> City ASHLAND State OH Zip Code 44805 <hr/> Purpose of Disbursement FUNDRAISER Candidate Name BILL HARRIS <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 19 <hr/> Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B003158S000002L29 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 1 0
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

1150.00

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)
CINCINNATI BELL INC FEDERAL PAC

A. Full Name (Last, First, Middle Initial) FRIENDS OF GREG JOLIVETTE Mailing Address 520 OAKWOOD DRIVE City HAMILTON State OH Zip Code 45013 Purpose of Disbursement FUNDRAISER Candidate Name GREG JOLIVETTE Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B003157S000001L29 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 1 0
	Amount of Each Disbursement this Period 300.00
	Category/Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) FRIENDS OF SHANNON JONES Mailing Address 800 VALLEY VIEW POINT City SPRINGBORO State OH Zip Code 45066 Purpose of Disbursement FUNDRAISER Candidate Name SHANNON JONES Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 07 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B003158S000001L29 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 1 0
	Amount of Each Disbursement this Period 300.00
	Category/Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) RON MAAG FOR STATE REPRESENTATIVE Mailing Address 2075 S STATE ROUTE 123 City LEBANON State OH Zip Code 45036 Purpose of Disbursement FUNDRAISER Candidate Name RON MAAG Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 35 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B003155S000005L29 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 1 0
	Amount of Each Disbursement this Period 250.00
	Category/Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

850.00

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)
CINCINNATI BELL INC FEDERAL PAC

A. Full Name (Last, First, Middle Initial)
MECKLENBORG FOR STATE REPRESENTATIVE

Mailing Address 5324 EDGER DRIVE

City CINCINNATI State OH Zip Code 45239

Purpose of Disbursement
FUNDRAISER

Candidate Name
BOB MECKLENBORG

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: OH District: 30

Transaction ID: B003155S000003L29
Date of Disbursement

04 / 05 / 2010

Amount of Each Disbursement this Period

250.00

B. Full Name (Last, First, Middle Initial)
COMMITTEE TO ELECT NIEHAUS

Mailing Address 1131 LITTLE INDIAN CREEK ROAD

City NEW RICHMOND State OH Zip Code 45157

Purpose of Disbursement
FUNDRAISER

Candidate Name
TOM NIEHAUS

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: OH District: 14

Transaction ID: B003155S000004L29
Date of Disbursement

04 / 05 / 2010

Amount of Each Disbursement this Period

500.00

C. Full Name (Last, First, Middle Initial)
COMMITTEE TO ELECT NIEHAUS

Mailing Address 1131 LITTLE INDIAN CREEK ROAD

City NEW RICHMOND State OH Zip Code 45157

Purpose of Disbursement
FUNDRAISER

Candidate Name
TOM NIEHAUS

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: OH District: 14

Transaction ID: B003158S000003L29
Date of Disbursement

04 / 20 / 2010

Amount of Each Disbursement this Period

300.00

SUBTOTAL of Disbursements This Page (optional)

1050.00

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)

PAGE 15 / 15

<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)
CINCINNATI BELL INC FEDERAL PAC

A.	Full Name (Last, First, Middle Initial) CITIZENS FOR SAYRE	Transaction ID: B003156S000001L29
	Mailing Address 176 DOWNEY HILL DRIVE NE	Date of Disbursement 04 / 12 / 2010
	City DOVER State OH Zip Code 44622	Amount of Each Disbursement this Period 350.00
	Purpose of Disbursement FUNDRAISER Candidate Name ALLAN SAYRE	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 96	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) STRICKLAND FOR GOVERNOR	Transaction ID: B003155S000002L29
	Mailing Address P.O. BOX 293	Date of Disbursement 04 / 05 / 2010
	City COLUMBUS State OH Zip Code 43216	Amount of Each Disbursement this Period 200.00
	Purpose of Disbursement FUNDRAISER Candidate Name TED STRICKLAND	011 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT JOE UECKER	Transaction ID: B003155S000006L29
	Mailing Address 298 INDIANVIEW DRIVE	Date of Disbursement 04 / 05 / 2010
	City LOVELAND State OH Zip Code 45140	Amount of Each Disbursement this Period 250.00
	Purpose of Disbursement FUNDRAISER Candidate Name JOE UECKER	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 66	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	800.00
TOTAL This Period (last page this line number only)	3850.00