

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 Cincinnatus PAC

ADDRESS (number and street) 225 W Court St Cincinnati OH 45202

2. FEC IDENTIFICATION NUMBER C C00574228 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31 (checked), July 31 Mid-Year, Termination Report. (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), Dec 20 (M12), Jan 31 (YE). (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S). (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S).

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. Callan, Sean, P., ,

Type or Print Name of Treasurer Signature of Treasurer Callan, Sean, P., , [Electronically Filed] Date 01 / 28 / 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

**Cincinnatus 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="2019"/>	<input type="text"/>	<input type="text" value="37422.67"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="71717.52"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="59750.00"/>	<input type="text" value="166071.00"/>
(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="131467.52"/>	<input type="text" value="203493.67"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="60419.07"/>	<input type="text" value="132445.22"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="71048.45"/>	<input type="text" value="71048.45"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

**Cincinnatus PAC**

Report Covering the Period: From:  /  /  To:  /  /

<b>I. Receipts</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	46000.00	144100.00
(ii) Unitemized .....	0.00	100.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	46000.00	144200.00
(b) Political Party Committees .....	6250.00	6250.00
(c) Other Political Committees (such as PACs).....	7500.00	15621.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	59750.00	166071.00
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)).....▶	59750.00	166071.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	59750.00	166071.00

**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 .....	43419.07	84745.22
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	43419.07	84745.22
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	11300.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
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).....	12000.00	36400.00
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)) ..	60419.07	132445.22
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	60419.07	132445.22

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	59750.00	166071.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	59750.00	166071.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	43419.07	84745.22
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	43419.07	84745.22

**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 45
	<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)  
**Cincinnatus PAC**

**A. Ackermann, Fleming, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7735 Annesdale Dr  
 City Cincinnati State OH Zip Code 45243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) None  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 11 / 19 / 2019  
**Transaction ID : SA11AI.6255**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Contribution

**B. Brett, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17 Carpenters Run  
 City Cincinnati State OH Zip Code 45241  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) River Cities Trading Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 02 / 2019  
**Transaction ID : SA11AI.6269**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item Contribution

**C. Budig, Otto, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1100 Gest St  
 City Cincinnati State OH Zip Code 45203  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Parsec, Inc. Occupation (for Individual) Owner  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 19 / 2019  
**Transaction ID : SA11AI.6254**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7000.00
<b>TOTAL</b> 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 45
	<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)  
**Cincinnatus PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Cioffi, Michael, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 06 / 2019
Mailing Address 201 E 5th St #1700			<b>Transaction ID : SA11AI.6252</b>
City Cincinnati	State OH	Zip Code 45202	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Contribution
Name of Employer (for Individual) Blank Rome		Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Fernandez, Emilio, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 01 / 2019
Mailing Address 2411 Grandin Rd			<b>Transaction ID : SA11AI.6246</b>
City Cincinnati	State OH	Zip Code 45208	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item C00351635
Name of Employer (for Individual) Elevar		Occupation (for Individual) Architect	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Goldner, Paul, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 03 / 2019
Mailing Address 3707 Corey Rd			<b>Transaction ID : SA11AI.6250</b>
City Toledo	State OH	Zip Code 43615	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Contribution
Name of Employer (for Individual) Retired		Occupation (for Individual) Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 2500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12500.00
<b>TOTAL</b> 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 45
	<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)  
**Cincinnatus PAC**

**A. Grantham, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 343 Summer View Dr  
 City Cincinnati State OH Zip Code 45255  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) River Cities Trading Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **12 / 02 / 2019**  
**Transaction ID : SA11AI.6267**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item Contribution

**B. Hatfield, Ed, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4905 Burely Hills Dr  
 City Cincinnati State OH Zip Code 45243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CBT Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **11 / 30 / 2019**  
**Transaction ID : SA11AI.6259**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Contribution

**C. Hatfield, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7785 Rock Hill  
 City Cincinnati State OH Zip Code 45243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) None  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **11 / 30 / 2019**  
**Transaction ID : SA11AI.6263**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7000.00
<b>TOTAL</b> 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 45
<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)  
**Cincinnatus PAC**

**A. Johnston, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1550 Mt Alpha Rd  
 City Cincinnati State OH Zip Code 45204  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) River Cities Trading Occupation (for Individual) Manager  
 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  
 12 / 01 / 2019  
**Transaction ID : SA11AI.6265**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item Contribution

**B. Kelly-Fernandez, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2411 Grandin Rd  
 City Cincinnati State OH Zip Code 45208  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) None  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 01 / 2019  
**Transaction ID : SA11AI.6248**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item Contribution

**C. Kulkami, Samir, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 740 Spring Lane  
 City Cincinnati State OH Zip Code 45226  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Real estate  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 16 / 2019  
**Transaction ID : SA11AI.6238**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6000.00
<b>TOTAL</b> 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 10 OF 45
	<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)  
**Cincinnatus PAC**

**A. Norton, Charlie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2055 Reading Rd  
 City Cincinnati State OH Zip Code 45202  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 08 / 06 / 2019  
**Transaction ID : SA11AI.6240**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item Contribution

**B. Santen, Harry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 440 Whitman Ct  
 City Cincinnati State OH Zip Code 45202  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 11 / 25 / 2019  
**Transaction ID : SA11AI.6257**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Contribution

**C. Schiff, Tom, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4 Grandin Terrace  
 City Cincinnati State OH Zip Code 45208  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) John J & Thomas Schiff Agency Occupation (for Individual) Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 12 / 04 / 2019  
**Transaction ID : SA11AI.6271**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12500.00
<b>TOTAL</b> 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 11 OF 45  
(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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Weiss, JACk, , ,

Mailing Address 10839 Omaha Trace

City Union	State KY	Zip Code 41091
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CBT	Occupation (for Individual) COO
--	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		30		2019

Transaction ID : SA11A1.6261

Amount of Each Receipt this Period  
1000.00

Memo Item Contribution

**B.** 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  

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

Amount of Each Receipt this Period

Memo Item

**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  

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	46000.00

**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 12 OF 45
<input type="checkbox"/> 11a	<input checked="" 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)  
**Cincinnatus PAC**

**A. CALFEE FUND FOR GOOD GOVERNMENT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1405 EAST SIXTH STREET

City CLEVELAND	State OH	Zip Code 44114
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00351635

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2019

**Transaction ID : SA11B.6244**

Amount of Each Receipt this Period  
1250.00

Memo Item  
C00351635

**B. COMCAST CORPORATION & NBCUNIVERSAL POLITICAL ACTION COMMITTEE - FEDERAL**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1701 JFK BLVD, 49TH FLOOR

City PHILADELPHIA	State PA	Zip Code 19103
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2019

**Transaction ID : SA11B.6242**

Amount of Each Receipt this Period  
5000.00

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  

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	6250.00

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

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

FOR LINE NUMBER: PAGE 13 OF 45  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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)  
**Cincinnatus PAC**

**A. BACPAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 700 Walnut St #450

City Cincinnati	State OH	Zip Code 45202
--------------------	-------------	-------------------

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 ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 08 / 2019

**Transaction ID : SA11C.6237**

Amount of Each Receipt this Period  
2500.00

Memo Item Contribution

**B. IBEW PAC Voluntary Fund**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 900 Seventh Street NW

City Washington	State DC	Zip Code 20001
--------------------	-------------	-------------------

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 ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 27 / 2019

**Transaction ID : SA11C.6272**

Amount of Each Receipt this Period  
5000.00

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

Amount of Each Receipt this Period

Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7500.00
<b>TOTAL</b> This Period (last page this line number only).....	7500.00

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Cincinnati PAC**

**A. ActBlue**

Full Name (Last, First, Middle Initial)

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144

Purpose of Disbursement Merchant fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 05 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6421

Amount of Each Disbursement this Period: 39.50

Memo Item

**B. ActBlue**

Full Name (Last, First, Middle Initial)

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144

Purpose of Disbursement Merchant fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 05 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6422

Amount of Each Disbursement this Period: 276.50

Memo Item

**C. ActBlue**

Full Name (Last, First, Middle Initial)

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144

Purpose of Disbursement Merchant fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 13 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6425

Amount of Each Disbursement this Period: 79.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 395.00

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

**A. Black Point**

Full Name (Last, First, Middle Initial)

Mailing Address 570 N High St

City Columbus State OH Zip Code 43215

Purpose of Disbursement Stakeholder Meeting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 14 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6308

Amount of Each Disbursement this Period: 245.33

Memo Item

**B. Canopy Hotel**

Full Name (Last, First, Middle Initial)

Mailing Address 77 E Nationwide Blvd

City Columbus State OH Zip Code 43215

Purpose of Disbursement Lodging

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 14 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6311

Amount of Each Disbursement this Period: 350.16

Memo Item

**C. Cincinnati zoo**

Full Name (Last, First, Middle Initial)

Mailing Address 3400 Vine St

City Cincinnati State OH Zip Code 45220

Purpose of Disbursement Event ticket

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 16 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6357

Amount of Each Disbursement this Period: 500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1095.49

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)  
**A. Corner Kitchen**

Mailing Address 613 E 5th St

City Dayton State OH Zip Code 45402

Purpose of Disbursement Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 09 / 06 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.6341**

Amount of Each Disbursement this Period: 291.58

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Crowner Plaza Dayton**

Mailing Address 33 E 5th St

City Dayton State OH Zip Code 45402

Purpose of Disbursement Lodging

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 09 / 09 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.6350**

Amount of Each Disbursement this Period: 377.94

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Doubletree**

Mailing Address 50 S Front St

City Columbus State OH Zip Code 43215

Purpose of Disbursement Lodging

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 16 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.6383**

Amount of Each Disbursement this Period: 267.52

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 937.04

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. First Watch</b>		Date of Disbursement MM / DD / YYYY 07 / 11 / 2019	
Mailing Address 700 Walnut Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.6283</b> Amount of Each Disbursement this Period [ ] 28.49	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Stakeholder Meeting		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. First Watch</b>		Date of Disbursement MM / DD / YYYY 08 / 07 / 2019	
Mailing Address 700 Walnut Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.6300</b> Amount of Each Disbursement this Period [ ] 23.83	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Stakeholder Meeting		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. First Watch</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2019	
Mailing Address 700 Walnut Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.6303</b> Amount of Each Disbursement this Period [ ] 50.94	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Stakeholder Meeting		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

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

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

[ ] 103.26
[ ]

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. First Watch</b>			Date of Disbursement MM / DD / YYYY 09 / 04 / 2019		
Mailing Address 700 Walnut Street			FEC Identification Number C [ ] <b>Transaction ID : SB21B.6336</b> Amount of Each Disbursement this Period [ ] 45.76		
City Cincinnati	State OH	Zip Code 45202	Category/Type [ ]		
Purpose of Disbursement Stakeholder Meeting			Memo Item <input type="checkbox"/>		
Candidate Name			Amount of Each Disbursement this Period [ ] 45.76		
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) ▼		Memo Item <input type="checkbox"/>		
State: District:			Amount of Each Disbursement this Period [ ] 45.76		
Full Name (Last, First, Middle Initial) <b>B. First Watch</b>			Date of Disbursement MM / DD / YYYY 09 / 18 / 2019		
Mailing Address 700 Walnut Street			FEC Identification Number C [ ] <b>Transaction ID : SB21B.6360</b> Amount of Each Disbursement this Period [ ] 30.79		
City Cincinnati	State OH	Zip Code 45202	Category/Type [ ]		
Purpose of Disbursement Stakeholder meeting			Memo Item <input type="checkbox"/>		
Candidate Name			Amount of Each Disbursement this Period [ ] 30.79		
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) ▼		Memo Item <input type="checkbox"/>		
State: District:			Amount of Each Disbursement this Period [ ] 30.79		
Full Name (Last, First, Middle Initial) <b>C. First Watch</b>			Date of Disbursement MM / DD / YYYY 10 / 16 / 2019		
Mailing Address 700 Walnut Street			FEC Identification Number C [ ] <b>Transaction ID : SB21B.6379</b> Amount of Each Disbursement this Period [ ] 26.75		
City Cincinnati	State OH	Zip Code 45202	Category/Type [ ]		
Purpose of Disbursement Stakeholder meeting			Memo Item <input type="checkbox"/>		
Candidate Name			Amount of Each Disbursement this Period [ ] 26.75		
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) ▼		Memo Item <input type="checkbox"/>		
State: District:			Amount of Each Disbursement this Period [ ] 26.75		
<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶			[ ] 103.30		
<b>TOTAL</b> 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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Incline Public House</b>		Date of Disbursement MM / DD / YYYY 07 / 11 / 2019	
Mailing Address 2601 W. 8th Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.6284</b> Amount of Each Disbursement this Period [ ] 33.82	
City Cincinnati	State OH	Zip Code 45206	Category/ Type [ ]
Purpose of Disbursement Stakeholder Meeting		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Incline Public House</b>		Date of Disbursement MM / DD / YYYY 08 / 07 / 2019	
Mailing Address 2601 W. 8th Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.6301</b> Amount of Each Disbursement this Period [ ] 50.66	
City Cincinnati	State OH	Zip Code 45206	Category/ Type [ ]
Purpose of Disbursement Stakeholder Meeting		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Incline Public House</b>		Date of Disbursement MM / DD / YYYY 08 / 16 / 2019	
Mailing Address 2601 W. 8th Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.6313</b> Amount of Each Disbursement this Period [ ] 32.82	
City Cincinnati	State OH	Zip Code 45206	Category/ Type [ ]
Purpose of Disbursement Stakeholder Meeting		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 117.30
<b>TOTAL</b> 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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

**A. Incline Public House**

Full Name (Last, First, Middle Initial)  
Mailing Address 2601 W. 8th Street

City Cincinnati State OH Zip Code 45206

Purpose of Disbursement Stakeholder Meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 21 / 2019

FEC Identification Number: C  
Transaction ID : SB21B.6314  
Amount of Each Disbursement this Period: 23.12

Memo Item

**B. Incline Public House**

Full Name (Last, First, Middle Initial)  
Mailing Address 2601 W. 8th Street

City Cincinnati State OH Zip Code 45206

Purpose of Disbursement Stakeholder Meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 29 / 2019

FEC Identification Number: C  
Transaction ID : SB21B.6325  
Amount of Each Disbursement this Period: 33.82

Memo Item

**C. Incline Public House**

Full Name (Last, First, Middle Initial)  
Mailing Address 2601 W. 8th Street

City Cincinnati State OH Zip Code 45206

Purpose of Disbursement Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 09 / 13 / 2019

FEC Identification Number: C  
Transaction ID : SB21B.6354  
Amount of Each Disbursement this Period: 37.03

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 93.97

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Incline Public House</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2019	
Mailing Address 2601 W. 8th Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.6371</b> Amount of Each Disbursement this Period [ ] 35.50	
City Cincinnati	State OH	Zip Code 45206	Category/ Type [ ]
Purpose of Disbursement Stakeholder meeting		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Amount of Each Disbursement this Period [ ] 35.50
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		
Full Name (Last, First, Middle Initial) <b>B. Incline Public House</b>		Date of Disbursement MM / DD / YYYY 10 / 23 / 2019	
Mailing Address 2601 W. 8th Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.6386</b> Amount of Each Disbursement this Period [ ] 32.44	
City Cincinnati	State OH	Zip Code 45206	Category/ Type [ ]
Purpose of Disbursement Stakeholder meeting		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Amount of Each Disbursement this Period [ ] 32.44
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: District:	
Full Name (Last, First, Middle Initial) <b>C. Incline Public House</b>		Date of Disbursement MM / DD / YYYY 11 / 08 / 2019	
Mailing Address 2601 W. 8th Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.6395</b> Amount of Each Disbursement this Period [ ] 18.98	
City Cincinnati	State OH	Zip Code 45206	Category/ Type [ ]
Purpose of Disbursement Stakeholder meeting		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Amount of Each Disbursement this Period [ ] 18.98
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: District:	
<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶		[ ] 86.92	
<b>TOTAL</b> 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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Incline Public House</b>		Date of Disbursement MM / DD / YYYY 11 / 27 / 2019	
Mailing Address 2601 W. 8th Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.6414</b> Amount of Each Disbursement this Period [ ] 33.82	
City Cincinnati	State OH	Zip Code 45206	Category/ Type [ ]
Purpose of Disbursement Stakeholder meeting		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>B. Liberty's Bar and Bottle</b>		Date of Disbursement MM / DD / YYYY 07 / 22 / 2019	
Mailing Address 1427 Main st		FEC Identification Number C [ ] <b>Transaction ID : SB21B.6294</b> Amount of Each Disbursement this Period [ ] 66.71	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Stakeholder Meeting		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>C. Liberty's Bar and Bottle</b>		Date of Disbursement MM / DD / YYYY 11 / 14 / 2019	
Mailing Address 1427 Main st		FEC Identification Number C [ ] <b>Transaction ID : SB21B.6396</b> Amount of Each Disbursement this Period [ ] 35.96	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Stakeholder meeting		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 136.49
<b>TOTAL</b> 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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)

### A. Manley Burke LPA

Mailing Address 225 W Court St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Legal fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 11 / 2019

FEC Identification Number

C  
**Transaction ID : SB21B.6285**  
Amount of Each Disbursement this Period  
500.00

Memo Item

Full Name (Last, First, Middle Initial)

### B. Manley Burke LPA

Mailing Address 225 W Court St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Legal fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 09 / 2019

FEC Identification Number

C  
**Transaction ID : SB21B.6302**  
Amount of Each Disbursement this Period  
500.00

Memo Item

Full Name (Last, First, Middle Initial)

### C. Manley Burke LPA

Mailing Address 225 W Court St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Legal fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 10 / 2019

FEC Identification Number

C  
**Transaction ID : SB21B.6353**  
Amount of Each Disbursement this Period  
500.00

Memo Item

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

**A. Manley Burke LPA**

Full Name (Last, First, Middle Initial)

Mailing Address 225 W Court St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Legal fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 08 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.6374**

Amount of Each Disbursement this Period: 500.00

Memo Item

**B. Manley Burke LPA**

Full Name (Last, First, Middle Initial)

Mailing Address 225 W Court St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Legal fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 13 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.6426**

Amount of Each Disbursement this Period: 1000.00

Memo Item

**C. Rivertown Strategies, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 224 E 8th St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 01 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.6278**

Amount of Each Disbursement this Period: 3000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 4500.00

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 07 / 01 / 2019	
Mailing Address 224 E 8th St		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.6279</b> Amount of Each Disbursement this Period [REDACTED] 746.35	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [REDACTED]
Purpose of Disbursement Lodging reimbursement		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 07 / 01 / 2019	
Mailing Address 224 E 8th St		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.6280</b> Amount of Each Disbursement this Period [REDACTED] 500.00	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [REDACTED]
Purpose of Disbursement Compliance		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 07 / 01 / 2019	
Mailing Address 224 E 8th St		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.6281</b> Amount of Each Disbursement this Period [REDACTED] 389.17	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [REDACTED]
Purpose of Disbursement Event supplies reimbursement		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 1635.52
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

# 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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

**A. Rivertown Strategies, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 224 E 8th St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Travel costs reimbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 15 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.6289**

Amount of Each Disbursement this Period: 501.53

Memo Item

**B. Rivertown Strategies, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 224 E 8th St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Strategic consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 01 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.6296**

Amount of Each Disbursement this Period: 3000.00

Memo Item

**C. Rivertown Strategies, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 224 E 8th St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Lodging reimbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 01 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.6297**

Amount of Each Disbursement this Period: 1068.22

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 4569.75

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 01 / 2019	
Mailing Address 224 E 8th St		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.6298</b> Amount of Each Disbursement this Period [REDACTED] 987.04	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [REDACTED]
Purpose of Disbursement Airfare reimbursement		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 01 / 2019	
Mailing Address 224 E 8th St		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.6299</b> Amount of Each Disbursement this Period [REDACTED] 667.50	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [REDACTED]
Purpose of Disbursement Compliance		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 14 / 2019	
Mailing Address 224 E 8th St		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.6310</b> Amount of Each Disbursement this Period [REDACTED] 317.21	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [REDACTED]
Purpose of Disbursement Travel costs reimbursement		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

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

[REDACTED] 1971.75

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 26 / 2019	
Mailing Address 224 E 8th St		FEC Identification Number C [ ] <b>Transaction ID : SB21B.6317</b> Amount of Each Disbursement this Period [ ] 580.94	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Event supplies reimbursement		Candidate Name	
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:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 26 / 2019	
Mailing Address 224 E 8th St		FEC Identification Number C [ ] <b>Transaction ID : SB21B.6318</b> Amount of Each Disbursement this Period [ ] 2803.32	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Travel costs reimbursement		Candidate Name	
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:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 09 / 03 / 2019	
Mailing Address 224 E 8th St		FEC Identification Number C [ ] <b>Transaction ID : SB21B.6334</b> Amount of Each Disbursement this Period [ ] 3000.00	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Strategic consulting		Candidate Name	
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:	<input type="checkbox"/> Memo Item		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 6384.26
<b>TOTAL</b> 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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 09 / 03 / 2019	
Mailing Address 224 E 8th St		FEC Identification Number C [ ] <b>Transaction ID : SB21B.6335</b> Amount of Each Disbursement this Period [ ] 913.45	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Lodging reimbursement		Candidate Name	
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) ▼		<input type="checkbox"/> Memo Item
State: [ ]	District: [ ]		

Full Name (Last, First, Middle Initial) <b>B. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 02 / 2019	
Mailing Address 224 E 8th St		FEC Identification Number C [ ] <b>Transaction ID : SB21B.6368</b> Amount of Each Disbursement this Period [ ] 920.35	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Travel costs reimbursement		Candidate Name	
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) ▼		<input type="checkbox"/> Memo Item
State: [ ]	District: [ ]		

Full Name (Last, First, Middle Initial) <b>C. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 02 / 2019	
Mailing Address 224 E 8th St		FEC Identification Number C [ ] <b>Transaction ID : SB21B.6369</b> Amount of Each Disbursement this Period [ ] 3000.00	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Strategic consulting		Candidate Name	
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) ▼		<input type="checkbox"/> Memo Item
State: [ ]	District: [ ]		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 4833.80
<b>TOTAL</b> 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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2019	
Mailing Address 224 E 8th St		FEC Identification Number C [ ] <b>Transaction ID : SB21B.6385</b> Amount of Each Disbursement this Period [ ] 1811.52	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Travel costs reimbursement		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 11 / 01 / 2019	
Mailing Address 224 E 8th St		FEC Identification Number C [ ] <b>Transaction ID : SB21B.6391</b> Amount of Each Disbursement this Period [ ] 3000.00	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Strategic consulting		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 11 / 01 / 2019	
Mailing Address 224 E 8th St		FEC Identification Number C [ ] <b>Transaction ID : SB21B.6392</b> Amount of Each Disbursement this Period [ ] 1174.36	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Travel costs		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 5985.88
<b>TOTAL</b> 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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

**A. Rivertown Strategies, LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address 224 E 8th St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Strategic consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 02 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6415

Amount of Each Disbursement this Period: 3000.00

Memo Item

**B. Rivertown Strategies, LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address 224 E 8th St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Travel costs reimbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 02 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6416

Amount of Each Disbursement this Period: 905.96

Memo Item

**C. Rivertown Strategies, LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address 224 E 8th St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Travel costs reimbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 16 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6428

Amount of Each Disbursement this Period: 1838.41

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 5744.37

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)

**A. Taste of Belgium**

Mailing Address 1135 Vine Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Stakeholder Meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 29 / 2019

FEC Identification Number

C

Transaction ID : SB21B.6326

Amount of Each Disbursement this Period

36.34

Memo Item

Full Name (Last, First, Middle Initial)

**B. Taste of Belgium**

Mailing Address 1135 Vine Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 16 / 2019

FEC Identification Number

C

Transaction ID : SB21B.6356

Amount of Each Disbursement this Period

38.90

Memo Item

Full Name (Last, First, Middle Initial)

**C. Top Steak**

Mailing Address 2891 E Main St

City Bexley State OH Zip Code 43209

Purpose of Disbursement Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2019

FEC Identification Number

C

Transaction ID : SB21B.6375

Amount of Each Disbursement this Period

250.76

Memo Item

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

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

326.00



**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Cincinnati PAC**

Full Name (Last, First, Middle Initial)

**A. Uber**

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Transportation costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 02 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.6282

Amount of Each Disbursement this Period

[REDACTED] 3.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Uber**

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Travel costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 26 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.6319

Amount of Each Disbursement this Period

[REDACTED] 4.35

Memo Item

Full Name (Last, First, Middle Initial)

**C. Uber**

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Travel costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 26 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.6322

Amount of Each Disbursement this Period

[REDACTED] 21.77

Memo Item

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

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

[REDACTED] 29.12

[REDACTED]

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)

**A. Uber**

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Travel costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 06 / 2019

FEC Identification Number

C  
**Transaction ID : SB21B.6343**  
Amount of Each Disbursement this Period  
28.16

Memo Item

Full Name (Last, First, Middle Initial)

**B. Uber**

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 16 / 2019

FEC Identification Number

C  
**Transaction ID : SB21B.6355**  
Amount of Each Disbursement this Period  
13.43

Memo Item

Full Name (Last, First, Middle Initial)

**C. Uber**

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Travel costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 18 / 2019

FEC Identification Number

C  
**Transaction ID : SB21B.6359**  
Amount of Each Disbursement this Period  
2.00

Memo Item

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

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

43.59

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

**A. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Travel costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 09 / 18 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.6361**

Amount of Each Disbursement this Period: 35.04

Memo Item

**B. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Travel costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 09 / 30 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.6366**

Amount of Each Disbursement this Period: 36.64

Memo Item

**C. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Travel costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 16 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.6377**

Amount of Each Disbursement this Period: 6.09

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 77.77

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)

### A. Uber

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Travel costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 16 / 2019

FEC Identification Number

C

Transaction ID : SB21B.6380

Amount of Each Disbursement this Period

30.47

Memo Item

Full Name (Last, First, Middle Initial)

### B. Uber

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Travel costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 28 / 2019

FEC Identification Number

C

Transaction ID : SB21B.6387

Amount of Each Disbursement this Period

55.70

Memo Item

Full Name (Last, First, Middle Initial)

### C. Uber

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Travel costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 31 / 2019

FEC Identification Number

C

Transaction ID : SB21B.6389

Amount of Each Disbursement this Period

18.00

Memo Item

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

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

104.17

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)

**A. Uber**

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Travel costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2019			

FEC Identification Number

**C**

**Transaction ID : SB21B.6390**

Amount of Each Disbursement this Period

23.52

Memo Item

Full Name (Last, First, Middle Initial)

**B. Via Vite**

Mailing Address 520 Vine St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify)

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
09			10			2019			

FEC Identification Number

**C**

**Transaction ID : SB21B.6352**

Amount of Each Disbursement this Period

37.03

Memo Item

Full Name (Last, First, Middle Initial)

**C. Via Vite**

Mailing Address 520 Vine St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			01			2019			

FEC Identification Number

**C**

**Transaction ID : SB21B.6367**

Amount of Each Disbursement this Period

350.51

Memo Item

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

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

<input type="text"/>	411.06
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<input type="text"/>	
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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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)

**A. Via Vite**

Mailing Address 520 Vine St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 05 / 2019

FEC Identification Number

C

Transaction ID : SB21B.6420

Amount of Each Disbursement this Period

51.34

Memo Item

Full Name (Last, First, Middle Initial)

**B. Via Vite**

Mailing Address 520 Vine St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 19 / 2019

FEC Identification Number

C

Transaction ID : SB21B.6429

Amount of Each Disbursement this Period

38.10

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

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

89.44

41275.25

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)  
**A. KATE FOR CONGRESS**

Mailing Address P.O. BOX 413

City CINCINNATI State OH Zip Code 45201

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: OH District: 01

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 16 / 2019

FEC Identification Number

C C00711630

Transaction ID : SB23.6430

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)  
**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

5000.00

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

5000.00

**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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)

**A. Committee to Re-Elect Judge Yates**

Mailing Address 602 Main St #808

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 12 / 2019

FEC Identification Number

C [ ]

Transaction ID : SB29.6440

Amount of Each Disbursement this Period

[ ] 600.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Cramerding for Council**

Mailing Address PO Box 413

City Cincinnati State OH Zip Code 45201

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 18 / 2019

FEC Identification Number

C [ ]

Transaction ID : SB29.6432

Amount of Each Disbursement this Period

[ ] 250.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Elect Jamie Rea**

Mailing Address 8870 Hollyhock Dr

City Cincinnati State OH Zip Code 45231

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 18 / 2019

FEC Identification Number

C [ ]

Transaction ID : SB29.6451

Amount of Each Disbursement this Period

[ ] 250.00

Memo Item

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

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

[ ] 1100.00

[ ]



**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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Emilia Sykes Campaign</b>		Date of Disbursement MM / DD / YYYY 12 / 17 / 2019	
Mailing Address 340 E Fulton St		FEC Identification Number C [ ] <b>Transaction ID : SB29.6463</b> Amount of Each Disbursement this Period [ ] 1000.00	
City Cincinnati	State OH	Zip Code 43215	Category/ Type [ ]
Purpose of Disbursement Contribution		Candidate Name	
Candidate Name	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>B. Eve Bolton for School Board</b>		Date of Disbursement MM / DD / YYYY 11 / 12 / 2019	
Mailing Address 602 Main St #808		FEC Identification Number C [ ] <b>Transaction ID : SB29.6459</b> Amount of Each Disbursement this Period [ ] 250.00	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Contribution		Candidate Name	
Candidate Name	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>C. Freinds of Denise Driehaus</b>		Date of Disbursement MM / DD / YYYY 09 / 11 / 2019	
Mailing Address 602 Main St		FEC Identification Number C [ ] <b>Transaction ID : SB29.6443</b> Amount of Each Disbursement this Period [ ] 500.00	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Contribution		Candidate Name	
Candidate Name	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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 1750.00
<b>TOTAL</b> 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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Friends of Alicia Reece</b>		Date of Disbursement MM / DD / YYYY 11 / 25 / 2019	
Mailing Address 762 E Mitchell Ave			
City Cincinnati	State OH	Zip Code 45229	
Purpose of Disbursement Contribution		<input type="checkbox"/> Category/Type	
Candidate Name		FEC Identification Number <b>C</b>	
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:	Transaction ID : <b>SB29.6461</b> Amount of Each Disbursement this Period 2000.00	
		<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Friends of Ben Lindy</b>		Date of Disbursement MM / DD / YYYY 10 / 29 / 2019	
Mailing Address 3517 Burch Ave			
City Cincinnati	State OH	Zip Code 45208	
Purpose of Disbursement Contribution		<input type="checkbox"/> Category/Type	
Candidate Name		FEC Identification Number <b>C</b>	
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:	Transaction ID : <b>SB29.6453</b> Amount of Each Disbursement this Period 250.00	
		<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Friends of Danny O'Connor</b>		Date of Disbursement MM / DD / YYYY 10 / 15 / 2019	
Mailing Address 545 E Town St			
City Columbus	State OH	Zip Code 43215	
Purpose of Disbursement Contribution		<input type="checkbox"/> Category/Type	
Candidate Name		FEC Identification Number <b>C</b>	
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:	Transaction ID : <b>SB29.6449</b> Amount of Each Disbursement this Period 500.00	
		<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2750.00
<b>TOTAL</b> 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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)

**A. Friends of Elizabeth Brown**

Mailing Address 222 E Town St

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Contribution to state candidate

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB29.6442**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Hamilton County Democratic Party Judicial Fund**

Mailing Address 6109 Webbland Pl

City Cincinnati State OH Zip Code 45213

Purpose of Disbursement  
Contribution

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB29.6438**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. InnovationOhio**

Mailing Address 360 S 3rd St

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Contribution

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB29.6466**  
Amount of Each Disbursement this Period

Memo Item

**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"/> 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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Janaya for Judge</b>		Date of Disbursement MM / DD / YYYY 11 / 01 / 2019	
Mailing Address 5961 Havenwood Ct		FEC Identification Number C [ ] <b>Transaction ID : SB29.6455</b> Amount of Each Disbursement this Period [ ] 250.00	
City Cincinnati	State OH	Zip Code 45237	Category/ Type <input type="checkbox"/> Memo Item
Purpose of Disbursement Contribution		Candidate Name	
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>B. John Kennedy for Judge</b>		Date of Disbursement MM / DD / YYYY 07 / 25 / 2019	
Mailing Address 10507 Springrun Rd		FEC Identification Number C [ ] <b>Transaction ID : SB29.6434</b> Amount of Each Disbursement this Period [ ] 600.00	
City Cincinnati	State OH	Zip Code 45231	Category/ Type <input type="checkbox"/> Memo Item
Purpose of Disbursement Contribution		Candidate Name	
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>C. Kari Bloom for Judge</b>		Date of Disbursement MM / DD / YYYY 07 / 25 / 2019	
Mailing Address 576 Grand Ave		FEC Identification Number C [ ] <b>Transaction ID : SB29.6436</b> Amount of Each Disbursement this Period [ ] 600.00	
City Cincinnati	State OH	Zip Code 45205	Category/ Type <input type="checkbox"/> Memo Item
Purpose of Disbursement Contribution		Candidate Name	
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:			
<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶		[ ] 1450.00	
<b>TOTAL</b> 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)  
**Cincinnatus PAC**

**A. Ohio House Democratic Caucus**

Full Name (Last, First, Middle Initial)

Mailing Address 340 E. Fulton Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB29.6465**  
Amount of Each Disbursement this Period

Memo Item

**B. Pam Bowers for School Board**

Full Name (Last, First, Middle Initial)

Mailing Address 602 Main St #808

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB29.6457**  
Amount of Each Disbursement this Period

Memo Item

**C. Vote Carolyn Jones**

Full Name (Last, First, Middle Initial)

Mailing Address 602 Main St #808

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB29.6445**  
Amount of Each Disbursement this Period

Memo Item

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

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