

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

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

2. **FEC IDENTIFICATION NUMBER** C00087478
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the: Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the: General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 01 01 2008 through 03 31 2008

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

Signature of Treasurer Electronically Filed by KIMBERLY SHEEHY Date 04 10 2008

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

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
CINCINNATI BELL INC FEDERAL PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		11688.44
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	11688.44									
(c) Total Receipts (from Line 19)	7110.39	7110.39								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	18798.83	18798.83								
7. Total Disbursements (from Line 31)	4950.00	4950.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	13848.83	13848.83								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
CINCINNATI BELL INC FEDERAL PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	1977.86	1977.86
(i) Itemized (use Schedule A)		
(ii) Unitemized	5132.53	5132.53
(iii) TOTAL (add Lines 11(a)(i) and (ii)	7110.39	7110.39
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	7110.39	7110.39
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	7110.39	7110.39
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	7110.39	7110.39

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1000.00	1000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	3950.00	3950.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	4950.00	4950.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4950.00	4950.00

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	7110.39	7110.39
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7110.39	7110.39
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 (check only one)	PAGE 6 / 27
	<input checked="" 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)
CINCINNATI BELL INC FEDERAL PAC

A.	Full Name (Last, First, Middle Initial) CHARLES R BURKE		Date of Receipt
	Mailing Address 7376 WALLINGFORD DR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 1 / 0 5 / 2 0 0 8
	City	State	Zip Code
	CINCINNATI	OH	45244
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer CINCINNATI BELL INC.		Occupation VP - INFORMATION TECHNOL	Transaction ID: B002793S000014L11A1
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text"/> 37.46
		<input type="text"/> 224.76	PAYROLL DEDUCTION

B.	Full Name (Last, First, Middle Initial) CHARLES R BURKE		Date of Receipt
	Mailing Address 7376 WALLINGFORD DR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 1 / 1 9 / 2 0 0 8
	City	State	Zip Code
	CINCINNATI	OH	45244
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer CINCINNATI BELL INC.		Occupation VP - INFORMATION TECHNOL	Transaction ID: B002794S000014L11A1
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text"/> 37.46
		<input type="text"/> 224.76	PAYROLL DEDUCTION

C.	Full Name (Last, First, Middle Initial) CHARLES R BURKE		Date of Receipt
	Mailing Address 7376 WALLINGFORD DR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 0 2 / 2 0 0 8
	City	State	Zip Code
	CINCINNATI	OH	45244
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer CINCINNATI BELL INC.		Occupation VP - INFORMATION TECHNOL	Transaction ID: B002801S000014L11A1
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text"/> 37.46
		<input type="text"/> 224.76	PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 112.38
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 (check only one)	PAGE 7 / 27
	<input checked="" type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) CHARLES R BURKE		Date of Receipt
	Mailing Address 7376 WALLINGFORD DR		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 1 6 / 2 0 0 8
	City	State	Zip Code
	CINCINNATI	OH	45244
	FEC ID number of contributing federal political committee. C		Transaction ID: B002806S000014L11A1
Name of Employer CINCINNATI BELL INC.		Occupation VP - INFORMATION TECHNOL	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 224.76	<input type="text"/> 37.46
PAYROLL DEDUCTION			

B.	Full Name (Last, First, Middle Initial) CHARLES R BURKE		Date of Receipt
	Mailing Address 7376 WALLINGFORD DR		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 3 / 0 1 / 2 0 0 8
	City	State	Zip Code
	CINCINNATI	OH	45244
	FEC ID number of contributing federal political committee. C		Transaction ID: B002813S000014L11A1
Name of Employer CINCINNATI BELL INC.		Occupation VP - INFORMATION TECHNOL	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 224.76	<input type="text"/> 37.46
PAYROLL DEDUCTION			

C.	Full Name (Last, First, Middle Initial) CHARLES R BURKE		Date of Receipt
	Mailing Address 7376 WALLINGFORD DR		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 3 / 1 5 / 2 0 0 8
	City	State	Zip Code
	CINCINNATI	OH	45244
	FEC ID number of contributing federal political committee. C		Transaction ID: B002817S000014L11A1
Name of Employer CINCINNATI BELL INC.		Occupation VP - INFORMATION TECHNOL	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 224.76	<input type="text"/> 37.46
PAYROLL DEDUCTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 112.38
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 27
	<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)
CINCINNATI BELL INC FEDERAL PAC

A.	Full Name (Last, First, Middle Initial) GARY A CORNETT		Date of Receipt
	Mailing Address 24 MARCEL CT		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 01 / 05 / 2008
	City	State	Zip Code
	FAIRFIELD	OH	45014
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer CINCINNATI BELL INC.		Occupation VP-PURCHASING/SUPPLY CHA	Transaction ID: B002793S000019L11A1 Amount of Each Receipt this Period <input type="text"/> 34.65 PAYROLL DEDUCTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 207.90	

B.	Full Name (Last, First, Middle Initial) GARY A CORNETT		Date of Receipt
	Mailing Address 24 MARCEL CT		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 01 / 19 / 2008
	City	State	Zip Code
	FAIRFIELD	OH	45014
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer CINCINNATI BELL INC.		Occupation VP-PURCHASING/SUPPLY CHA	Transaction ID: B002794S000019L11A1 Amount of Each Receipt this Period <input type="text"/> 34.65 PAYROLL DEDUCTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 207.90	

C.	Full Name (Last, First, Middle Initial) GARY A CORNETT		Date of Receipt
	Mailing Address 24 MARCEL CT		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 02 / 02 / 2008
	City	State	Zip Code
	FAIRFIELD	OH	45014
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer CINCINNATI BELL INC.		Occupation VP-PURCHASING/SUPPLY CHA	Transaction ID: B002801S000018L11A1 Amount of Each Receipt this Period <input type="text"/> 34.65 PAYROLL DEDUCTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 207.90	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 103.95
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 27
	(check only one)
<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)
CINCINNATI BELL INC FEDERAL PAC

A.	Full Name (Last, First, Middle Initial) GARY A CORNETT		Date of Receipt
	Mailing Address 24 MARCEL CT		<input type="text" value="02"/> / <input type="text" value="16"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	FAIRFIELD	OH	45014
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer CINCINNATI BELL INC.		Occupation VP-PURCHASING/SUPPLY CHA	Transaction ID: B002806S000018L11A1 Amount of Each Receipt this Period <input type="text" value="34.65"/> PAYROLL DEDUCTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="207.90"/>	

B.	Full Name (Last, First, Middle Initial) GARY A CORNETT		Date of Receipt
	Mailing Address 24 MARCEL CT		<input type="text" value="03"/> / <input type="text" value="01"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	FAIRFIELD	OH	45014
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer CINCINNATI BELL INC.		Occupation VP-PURCHASING/SUPPLY CHA	Transaction ID: B002813S000018L11A1 Amount of Each Receipt this Period <input type="text" value="34.65"/> PAYROLL DEDUCTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="207.90"/>	

C.	Full Name (Last, First, Middle Initial) GARY A CORNETT		Date of Receipt
	Mailing Address 24 MARCEL CT		<input type="text" value="03"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	FAIRFIELD	OH	45014
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer CINCINNATI BELL INC.		Occupation VP-PURCHASING/SUPPLY CHA	Transaction ID: B002817S000018L11A1 Amount of Each Receipt this Period <input type="text" value="34.65"/> PAYROLL DEDUCTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="207.90"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="103.95"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 27
	<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)
CINCINNATI BELL INC FEDERAL PAC

A.	Full Name (Last, First, Middle Initial) ANN W CRABLE		Date of Receipt
	Mailing Address 400 PIKE ST UNIT 1008		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 01 / 05 / 2008
	City	State	Zip Code
	CINCINNATI	OH	45202
	FEC ID number of contributing federal political committee. C		Transaction ID: B002793S000022L11A1
Name of Employer CINCINNATI BELL		Occupation SVP - OPERATIONS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.21	<input type="text"/> 32.63
PAYROLL DEDUCTION			

B.	Full Name (Last, First, Middle Initial) ANN W CRABLE		Date of Receipt
	Mailing Address 400 PIKE ST UNIT 1008		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 01 / 19 / 2008
	City	State	Zip Code
	CINCINNATI	OH	45202
	FEC ID number of contributing federal political committee. C		Transaction ID: B002794S000022L11A1
Name of Employer CINCINNATI BELL		Occupation SVP - OPERATIONS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.21	<input type="text"/> 32.63
PAYROLL DEDUCTION			

C.	Full Name (Last, First, Middle Initial) ANN W CRABLE		Date of Receipt
	Mailing Address 400 PIKE ST UNIT 1008		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 02 / 02 / 2008
	City	State	Zip Code
	CINCINNATI	OH	45202
	FEC ID number of contributing federal political committee. C		Transaction ID: B002801S000021L11A1
Name of Employer CINCINNATI BELL		Occupation SVP - OPERATIONS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.21	<input type="text"/> 159.95
PAYROLL DEDUCTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 225.21
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 27
	<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)
CINCINNATI BELL INC FEDERAL PAC

A.	Full Name (Last, First, Middle Initial) ANTHONY W DELLECAVE		Date of Receipt
	Mailing Address 3520 PEMBROKE AV #2		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 1 / 0 5 / 2 0 0 8
	City	State	Zip Code
	CINCINNATI	OH	45208
	FEC ID number of contributing federal political committee. C		Transaction ID: B002793S000027L11A1
Name of Employer CINCINNATI BELL INC.		Occupation DIR-COMNTY REL&CORP MKT	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 202.44	<input type="text"/> 33.74
PAYROLL DEDUCTION			

B.	Full Name (Last, First, Middle Initial) ANTHONY W DELLECAVE		Date of Receipt
	Mailing Address 3520 PEMBROKE AV #2		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 1 / 1 9 / 2 0 0 8
	City	State	Zip Code
	CINCINNATI	OH	45208
	FEC ID number of contributing federal political committee. C		Transaction ID: B002794S000027L11A1
Name of Employer CINCINNATI BELL INC.		Occupation DIR-COMNTY REL&CORP MKT	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 202.44	<input type="text"/> 33.74
PAYROLL DEDUCTION			

C.	Full Name (Last, First, Middle Initial) ANTHONY W DELLECAVE		Date of Receipt
	Mailing Address 3520 PEMBROKE AV #2		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 0 2 / 2 0 0 8
	City	State	Zip Code
	CINCINNATI	OH	45208
	FEC ID number of contributing federal political committee. C		Transaction ID: B002801S000026L11A1
Name of Employer CINCINNATI BELL INC.		Occupation DIR-COMNTY REL&CORP MKT	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 202.44	<input type="text"/> 33.74
PAYROLL DEDUCTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 101.22
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 27
	<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)
CINCINNATI BELL INC FEDERAL PAC

A.	Full Name (Last, First, Middle Initial) ANTHONY W DELLECAVE		Date of Receipt
	Mailing Address 3520 PEMBROKE AV #2		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 1 6 / 2 0 0 8
	City	State	Zip Code
	CINCINNATI	OH	45208
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer CINCINNATI BELL INC.		Occupation DIR-COMNTY REL&CORP MKT	Transaction ID: B002806S000025L11A1 Amount of Each Receipt this Period <input type="text"/> 33.74 PAYROLL DEDUCTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 202.44	

B.	Full Name (Last, First, Middle Initial) ANTHONY W DELLECAVE		Date of Receipt
	Mailing Address 3520 PEMBROKE AV #2		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 3 / 0 1 / 2 0 0 8
	City	State	Zip Code
	CINCINNATI	OH	45208
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer CINCINNATI BELL INC.		Occupation DIR-COMNTY REL&CORP MKT	Transaction ID: B002813S000025L11A1 Amount of Each Receipt this Period <input type="text"/> 33.74 PAYROLL DEDUCTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 202.44	

C.	Full Name (Last, First, Middle Initial) ANTHONY W DELLECAVE		Date of Receipt
	Mailing Address 3520 PEMBROKE AV #2		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 3 / 1 5 / 2 0 0 8
	City	State	Zip Code
	CINCINNATI	OH	45208
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer CINCINNATI BELL INC.		Occupation DIR-COMNTY REL&CORP MKT	Transaction ID: B002817S000025L11A1 Amount of Each Receipt this Period <input type="text"/> 33.74 PAYROLL DEDUCTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 202.44	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 101.22
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 27
	<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)
CINCINNATI BELL INC FEDERAL PAC

A.	Full Name (Last, First, Middle Initial) KURT A FREYBERGER		Date of Receipt
	Mailing Address 30 LINDEN AVE		<input type="text" value="01"/> / <input type="text" value="05"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	FT	KY	41075
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer CINCINNATI BELL INC.		Occupation VP & CONTROLLER	Transaction ID: B002791S000005L11A1
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="257.89"/>	<input type="text" value="41.54"/>
PAYROLL DEDUCTION			

B.	Full Name (Last, First, Middle Initial) KURT A FREYBERGER		Date of Receipt
	Mailing Address 30 LINDEN AVE		<input type="text" value="01"/> / <input type="text" value="19"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	FT	KY	41075
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer CINCINNATI BELL INC.		Occupation VP & CONTROLLER	Transaction ID: B002792S000005L11A1
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="257.89"/>	<input type="text" value="43.27"/>
PAYROLL DEDUCTION			

C.	Full Name (Last, First, Middle Initial) KURT A FREYBERGER		Date of Receipt
	Mailing Address 30 LINDEN AVE		<input type="text" value="02"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	FT	KY	41075
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer CINCINNATI BELL INC.		Occupation VP & CONTROLLER	Transaction ID: B002800S000005L11A1
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="257.89"/>	<input type="text" value="43.27"/>
PAYROLL DEDUCTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="128.08"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 27
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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

A.

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

Mailing Address 30 LINDEN AVE

City State Zip Code
FT KY 41075

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

Name of Employer CINCINNATI BELL INC. Occupation VP & CONTROLLER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 257.89

Date of Receipt
MM / DD / YYYY
02 / 16 / 2008

Transaction ID: B002805S000005L11A1

Amount of Each Receipt this Period
43.27

PAYROLL DEDUCTION

B.

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

Mailing Address 30 LINDEN AVE

City State Zip Code
FT KY 41075

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

Name of Employer CINCINNATI BELL INC. Occupation VP & CONTROLLER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 257.89

Date of Receipt
MM / DD / YYYY
03 / 01 / 2008

Transaction ID: B002811S000005L11A1

Amount of Each Receipt this Period
43.27

PAYROLL DEDUCTION

C.

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

Mailing Address 30 LINDEN AVE

City State Zip Code
FT KY 41075

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

Name of Employer CINCINNATI BELL INC. Occupation VP & CONTROLLER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 257.89

Date of Receipt
MM / DD / YYYY
03 / 15 / 2008

Transaction ID: B002818S000005L11A1

Amount of Each Receipt this Period
43.27

PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional) ► **129.81**

TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 27
	<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)
CINCINNATI BELL INC FEDERAL PAC

A.	Full Name (Last, First, Middle Initial) BRIAN G KEATING		Date of Receipt
	Mailing Address 2521 SALEM ST		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 1 / 0 5 / 2 0 0 8
	City	State	Zip Code
	CINCINNATI	OH	45208
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer CINCINNATI BELL		Occupation VP - HR & ADMINISTRATION	Transaction ID: B002791S000008L11A1 Amount of Each Receipt this Period <input type="text"/> 50.00 PAYROLL DEDUCTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 300.00	

B.	Full Name (Last, First, Middle Initial) BRIAN G KEATING		Date of Receipt
	Mailing Address 2521 SALEM ST		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 1 / 1 9 / 2 0 0 8
	City	State	Zip Code
	CINCINNATI	OH	45208
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer CINCINNATI BELL		Occupation VP - HR & ADMINISTRATION	Transaction ID: B002792S000008L11A1 Amount of Each Receipt this Period <input type="text"/> 50.00 PAYROLL DEDUCTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 300.00	

C.	Full Name (Last, First, Middle Initial) BRIAN G KEATING		Date of Receipt
	Mailing Address 2521 SALEM ST		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 0 2 / 2 0 0 8
	City	State	Zip Code
	CINCINNATI	OH	45208
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer CINCINNATI BELL		Occupation VP - HR & ADMINISTRATION	Transaction ID: B002800S000008L11A1 Amount of Each Receipt this Period <input type="text"/> 50.00 PAYROLL DEDUCTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 300.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 150.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 27
	<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)
CINCINNATI BELL INC FEDERAL PAC

A.	Full Name (Last, First, Middle Initial) BRIAN G KEATING		Date of Receipt
	Mailing Address 2521 SALEM ST		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 1 6 / 2 0 0 8
	City	State	Zip Code
	CINCINNATI	OH	45208
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer CINCINNATI BELL		Occupation VP - HR & ADMINISTRATION	Transaction ID: B002805S000008L11A1 Amount of Each Receipt this Period <input type="text"/> 50.00 PAYROLL DEDUCTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 300.00	

B.	Full Name (Last, First, Middle Initial) BRIAN G KEATING		Date of Receipt
	Mailing Address 2521 SALEM ST		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 3 / 0 1 / 2 0 0 8
	City	State	Zip Code
	CINCINNATI	OH	45208
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer CINCINNATI BELL		Occupation VP - HR & ADMINISTRATION	Transaction ID: B002811S000008L11A1 Amount of Each Receipt this Period <input type="text"/> 50.00 PAYROLL DEDUCTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 300.00	

C.	Full Name (Last, First, Middle Initial) BRIAN G KEATING		Date of Receipt
	Mailing Address 2521 SALEM ST		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 3 / 1 5 / 2 0 0 8
	City	State	Zip Code
	CINCINNATI	OH	45208
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer CINCINNATI BELL		Occupation VP - HR & ADMINISTRATION	Transaction ID: B002818S000007L11A1 Amount of Each Receipt this Period <input type="text"/> 50.00 PAYROLL DEDUCTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 300.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 150.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) PHILLIP T PARKS		Date of Receipt MM / DD / YYYY 01 / 05 / 2008
	Mailing Address 3665 WALNUT PARK		Transaction ID: B002793S000076L11A1
	City ALEXANDRIA	State KY	Zip Code 41001
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 34.03
	Name of Employer CINCINNATI BELL INC.	Occupation VP-NTWK ENG & CONSTRUCTI	PAYROLL DEDUCTION

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 204.18
---	------------------------------------

B.	Full Name (Last, First, Middle Initial) PHILLIP T PARKS		Date of Receipt MM / DD / YYYY 01 / 19 / 2008
	Mailing Address 3665 WALNUT PARK		Transaction ID: B002794S000076L11A1
	City ALEXANDRIA	State KY	Zip Code 41001
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 34.03
	Name of Employer CINCINNATI BELL INC.	Occupation VP-NTWK ENG & CONSTRUCTI	PAYROLL DEDUCTION

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 204.18
---	------------------------------------

C.	Full Name (Last, First, Middle Initial) PHILLIP T PARKS		Date of Receipt MM / DD / YYYY 02 / 02 / 2008
	Mailing Address 3665 WALNUT PARK		Transaction ID: B002801S000075L11A1
	City ALEXANDRIA	State KY	Zip Code 41001
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 34.03
	Name of Employer CINCINNATI BELL INC.	Occupation VP-NTWK ENG & CONSTRUCTI	PAYROLL DEDUCTION

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 204.18
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SUBTOTAL of Receipts This Page (optional)	▶	102.09
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) PHILLIP T PARKS		Date of Receipt
	Mailing Address 3665 WALNUT PARK		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 1 6 / 2 0 0 8
	City	State	Zip Code
	ALEXANDRIA	KY	41001
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer CINCINNATI BELL INC.		Occupation VP-NTWK ENG & CONSTRUCTI	Transaction ID: B002806S000073L11A1
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text"/> 34.03
		<input type="text"/> 204.18	PAYROLL DEDUCTION

B.	Full Name (Last, First, Middle Initial) PHILLIP T PARKS		Date of Receipt
	Mailing Address 3665 WALNUT PARK		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 3 / 0 1 / 2 0 0 8
	City	State	Zip Code
	ALEXANDRIA	KY	41001
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer CINCINNATI BELL INC.		Occupation VP-NTWK ENG & CONSTRUCTI	Transaction ID: B002813S000072L11A1
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text"/> 34.03
		<input type="text"/> 204.18	PAYROLL DEDUCTION

C.	Full Name (Last, First, Middle Initial) PHILLIP T PARKS		Date of Receipt
	Mailing Address 3665 WALNUT PARK		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 3 / 1 5 / 2 0 0 8
	City	State	Zip Code
	ALEXANDRIA	KY	41001
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer CINCINNATI BELL INC.		Occupation VP-NTWK ENG & CONSTRUCTI	Transaction ID: B002817S000072L11A1
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text"/> 34.03
		<input type="text"/> 204.18	PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 102.09
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 27
	<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)
CINCINNATI BELL INC FEDERAL PAC

A.	Full Name (Last, First, Middle Initial) CHRISTOPHER J WILSON		Date of Receipt
	Mailing Address 598 RIVERSHORE DRIVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 1 / 0 5 / 2 0 0 8
	City	State	Zip Code
	HEBRON	KY	41048
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer CINCINNATI BELL INC.		Occupation VP & GENERAL COUNSEL	Transaction ID: B002791S000012L11A1 Amount of Each Receipt this Period <input type="text"/> 58.38 PAYROLL DEDUCTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 355.48	

B.	Full Name (Last, First, Middle Initial) CHRISTOPHER J WILSON		Date of Receipt
	Mailing Address 598 RIVERSHORE DRIVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 1 / 1 9 / 2 0 0 8
	City	State	Zip Code
	HEBRON	KY	41048
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer CINCINNATI BELL INC.		Occupation VP & GENERAL COUNSEL	Transaction ID: B002792S000012L11A1 Amount of Each Receipt this Period <input type="text"/> 59.42 PAYROLL DEDUCTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 355.48	

C.	Full Name (Last, First, Middle Initial) CHRISTOPHER J WILSON		Date of Receipt
	Mailing Address 598 RIVERSHORE DRIVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 0 2 / 2 0 0 8
	City	State	Zip Code
	HEBRON	KY	41048
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer CINCINNATI BELL INC.		Occupation VP & GENERAL COUNSEL	Transaction ID: B002800S000012L11A1 Amount of Each Receipt this Period <input type="text"/> 59.42 PAYROLL DEDUCTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 355.48	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 177.22
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 27
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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

A.

Full Name (Last, First, Middle Initial)
CHRISTOPHER J WILSON

Mailing Address 598 RIVERSHORE DRIVE

City State Zip Code
HEBRON KY 41048

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

Name of Employer CINCINNATI BELL INC. Occupation VP & GENERAL COUNSEL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 355.48

Date of Receipt
MM / DD / YYYY
02 / 16 / 2008

Transaction ID: B002805S000012L11A1

Amount of Each Receipt this Period
59.42

PAYROLL DEDUCTION

B.

Full Name (Last, First, Middle Initial)
CHRISTOPHER J WILSON

Mailing Address 598 RIVERSHORE DRIVE

City State Zip Code
HEBRON KY 41048

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

Name of Employer CINCINNATI BELL INC. Occupation VP & GENERAL COUNSEL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 355.48

Date of Receipt
MM / DD / YYYY
03 / 01 / 2008

Transaction ID: B002811S000013L11A1

Amount of Each Receipt this Period
59.42

PAYROLL DEDUCTION

C.

Full Name (Last, First, Middle Initial)
CHRISTOPHER J WILSON

Mailing Address 598 RIVERSHORE DRIVE

City State Zip Code
HEBRON KY 41048

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

Name of Employer CINCINNATI BELL INC. Occupation VP & GENERAL COUNSEL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 355.48

Date of Receipt
MM / DD / YYYY
03 / 15 / 2008

Transaction ID: B002818S000013L11A1

Amount of Each Receipt this Period
59.42

PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)	178.26
TOTAL This Period (last page this line number only)	1977.86

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

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

FOR LINE NUMBER:
(check only one)

PAGE 21 / 27

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

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

A.

Full Name (Last, First, Middle Initial)
SCHMIDT FOR CONGRESS COMMITTEE

Transaction ID: B002820S000001L23

Date of Disbursement

Mailing Address 771 WARDS CORNER ROAD

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

City LOVELAND State OH Zip Code 45140

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
SUPPORT

011
Category/ Type

Candidate Name
JEAN SCHMIDT

Office Sought: House
 Senate
 President
State: OH District: 02

Disbursement For: 2008
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

1000.00

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

1000.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 22 / 27

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

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

<p>A. Full Name (Last, First, Middle Initial) BARRETT FOR STATE REPRESENTATIVE</p> <p>Mailing Address 354 GOLDEN RUSSETT BLVD</p> <p>City AMHERST State OH Zip Code 44001</p> <p>Purpose of Disbursement FUNDRAISER</p> <p>Candidate Name MATTHEW BARRETT</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>Transaction ID: B002799S000001L29</p> <p>Date of Disbursement <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>Amount of Each Disbursement this Period <input type="text"/></p>
<p>B. Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT BLESSING</p> <p>Mailing Address 3153 MCGILL LANE</p> <p>City CINCINNATI State OH Zip Code 45251</p> <p>Purpose of Disbursement FUNDRAISER</p> <p>Candidate Name LOUIS BLESSING</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>Transaction ID: B002821S000003L29</p> <p>Date of Disbursement <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>Amount of Each Disbursement this Period <input type="text"/></p>
<p>C. Full Name (Last, First, Middle Initial) BOOK ELECTION COMMITTEE</p> <p>Mailing Address 421 LITTLE CHERYL DRIVE</p> <p>City MCDERMOTT State OH Zip Code 45652</p> <p>Purpose of Disbursement FUNDRAISER</p> <p>Candidate Name TODD BOOK</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>Transaction ID: B002821S000008L29</p> <p>Date of Disbursement <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>Amount of Each Disbursement this Period <input type="text"/></p>

SUBTOTAL of Disbursements This Page (optional)

750.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 23 / 27

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

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

A.	Full Name (Last, First, Middle Initial) CITIZENS TO ELECT JOHN PATRICK CARNEY	Transaction ID: B002799S000002L29
	Mailing Address 357 E. TORRENCE ROAD	Date of Disbursement MM / DD / YYYY 01 / 25 / 2008
	City COLUMBUS State OH Zip Code 43214	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement FUNDRAISER Candidate Name JOHN PATRICK CARNEY	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) FRIENDS OF BILL COLEY	Transaction ID: B002821S000004L29
	Mailing Address 8265 CHERRY LAUREL DRIVE	Date of Disbursement MM / DD / YYYY 03 / 14 / 2008
	City MIDDLETOWN State OH Zip Code 45044	Amount of Each Disbursement this Period 300.00
	Purpose of Disbursement FUNDRAISER Candidate Name BILL COLEY	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) FRIENDS OF TIM DEGEETER	Transaction ID: B002821S000009L29
	Mailing Address 2700 TUXEDO AVENUE	Date of Disbursement MM / DD / YYYY 03 / 14 / 2008
	City PARMA State OH Zip Code 44134	Amount of Each Disbursement this Period 250.00
	Purpose of Disbursement FRUNDRAISER Candidate Name TIM DEGEETER	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional) ▶

700.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 24 / 27

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

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

A.	Full Name (Last, First, Middle Initial) FRIENDS OF MATTHEW J. DOLAN	Transaction ID: B002822S000001L29
	Mailing Address 100 7TH AVENUE #12	Date of Disbursement MM / DD / YYYY 03 / 28 / 2008
	City CHARDON State OH Zip Code 44024	Amount of Each Disbursement this Period 200.00
	Purpose of Disbursement FUNDRAISER Candidate Name MATTHEW J. DOLAN	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) DRIEHAUS FOR STATE REPRESENTATIVE	Transaction ID: B002799S000003L29
	Mailing Address 4990 RELLEUM AVENUE	Date of Disbursement MM / DD / YYYY 01 / 25 / 2008
	City CINCINNATI State OH Zip Code 45238	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement FUNDRAISER Candidate Name DENISE DRIEHAUS	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) FRIENDS OF JAY GOYAL	Transaction ID: B002821S000007L29
	Mailing Address 2584 WAHL DRIVE	Date of Disbursement MM / DD / YYYY 03 / 14 / 2008
	City MANSFIELD State OH Zip Code 44904	Amount of Each Disbursement this Period 250.00
	Purpose of Disbursement FUNDRAISER Candidate Name JAY GOYAL	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	600.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 25 / 27

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

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

A. Full Name (Last, First, Middle Initial) MALLORY FOR CITIZENS <hr/> Mailing Address 907 DAYTON STREET <hr/> City CINCINNATI State OH Zip Code 45214 <hr/> Purpose of Disbursement REQUEST Candidate Name MARK MALLORY Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B002823S000001L29 Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2008
	Amount of Each Disbursement this Period 100.00
	Category/ Type 011
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) CITIZENS FOR JOSH MANDEL <hr/> Mailing Address 2119 COTTINGHAM DRIVE <hr/> City LYNDHURST State OH Zip Code 44124 <hr/> Purpose of Disbursement FUNDRAISER Candidate Name JOSH MANDEL Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B002822S000002L29 Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2008
	Amount of Each Disbursement this Period 200.00
	Category/ Type 011
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) MECKLENBORG FOR STATE REPRESENTATIVE <hr/> Mailing Address 5324 EDGER DRIVE <hr/> City CINCINNATI State OH Zip Code 45239 <hr/> Purpose of Disbursement FUNDRAISER Candidate Name BOB MECKLENBORG Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B002799S000004L29 Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2008
	Amount of Each Disbursement this Period 250.00
	Category/ Type 011
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

550.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

A. Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT NIEHAUS <hr/> Mailing Address 1131 LITTLE INDIAN CREEK ROAD <hr/> City NEW RICHMOND State OH Zip Code 45157 <hr/> Purpose of Disbursement FUNDRAISER Candidate Name TOM NIEHAUS <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B002821S000005L29 Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2008
	Amount of Each Disbursement this Period 300.00
	Category/Type 011
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) SCHULER CAMPAIGN COMMITTEE <hr/> Mailing Address 9079 MONTGOMERY RD <hr/> City CINCINNATI State OH Zip Code 45242 <hr/> Purpose of Disbursement FUNDRAISER Candidate Name BOB SCHULER <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B002821S000001L29 Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2008
	Amount of Each Disbursement this Period 300.00
	Category/Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) SEITZ FOR SENATE COMMITTEE <hr/> Mailing Address 4401 ABBY COURT <hr/> City CINCINNATI State OH Zip Code 45248 <hr/> Purpose of Disbursement FUNDRAISER Candidate Name WILLIAM SEITZ <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B002821S000006L29 Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2008
	Amount of Each Disbursement this Period 300.00
	Category/Type 011
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

900.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 27 / 27

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

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

A.	Full Name (Last, First, Middle Initial) CITIZENS FOR MARY TAYLOR	Transaction ID: B002821S000002L29
	Mailing Address 3788 PARK RIDGE DRIVE	Date of Disbursement MM / DD / YYYY 03 / 14 / 2008
	City UNIONTOWN State OH Zip Code 44685	Amount of Each Disbursement this Period 300.00
	Purpose of Disbursement FUNDRAISER Candidate Name MARY TAYLOR	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) FRIENDS OF JILL THOMPSON	Transaction ID: B002809S000001L29
	Mailing Address 107 E. STATE STREET	Date of Disbursement MM / DD / YYYY 02 / 15 / 2008
	City ATHENS State OH Zip Code 45701	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement FUNDRAISER Candidate Name JILL THOMPSON	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

450.00

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

3950.00