REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)

C00222000 120798 P 207
JAMES C RAY JR
REPUBLICAN FINANCE COMMITTEE O
F HAMILTON COUNTY
700 WALNUT STREET SUITE 309
CINCINNATI OH 45202

FEDERAL ELECTION COMMISSION MAIL ROOM

2. FEC IDENTIFICATION NUMBER 99 AM 33

3. [X] This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

(a) [ ] April 15 Quarterly Report

[ ] July 15 Quarterly Report

[ ] October 15 Quarterly Report

[X] January 31 Year-End Report

[ ] July 31 Mid Year Report (Non-election Year Only)

[ ] Termination Report

Monthly Report Due On:

[ ] February 20	[ ] June 20	[ ] October 20
[ ] March 20	[ ] July 20	[ ] November 20
[ ] April 20	[ ] August 20	[ ] December 20
[ ] May 20	[ ] September 20	[ ] January 31

[ ] 12-Day Pre-Election Report for the _____ (Type of Election) election on _____ in the State of _____

[ ] 30-Day Post-Election Report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? [ ] YES [X] NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 11/24/98 through 12/31/98		
6. (a) Cash on Hand January 1, 19 98		$ 1,865.99
(b) Cash on Hand at Beginning of Reporting Period	$ 178.86	
(c) Total Receipts (from Line 19)	$ ---	$ 45,599.17
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 178.86	$ 47,465.16
7. Total Disbursements (from Line 30)	$ 98.14	$ 47,384.44
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 80.72	$ 80.72
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

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
Marcus Jenkins

Signature of Treasurer
Marcus Jenkins

Date 1/25/99

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

FEC FORM 3X
(revised 9/93)

FL3AN064

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE: THE REPUBLICAN FINANCE COMMITTEE OF HAMILTON COUNTY

REPORT COVERING PERIOD FROM 11/24/98 TO: 12/31/98

	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	---	36,050.00	11(a)(i)
ii. Unitemized	---	6,537.74	11(a)(ii)
iii. Total (add i and ii) ➤	---	42,587.74	11(a)(iii)
b. Political Party Committees	---	---	11(b)
c. Other Political Committees (such as PACs)	---	3,000.00	11(c)
d. Total Contributions (add a iii, b and c) ➤	---	45,587.74	11(d)
12. Transfers From Affiliated/Other Party Committees	---	---	12
13. All Loans Received	---	---	13
14. Loan Repayments Received	---	---	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	---	---	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	---	---	16
17. Other Federal Receipts (Dividends, Interest, etc.)	---	11.43	17
18. Transfers from Nonfederal Account for Joint Activity	---	---	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	---	45,599.17	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	---	45,599.17	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	---	---	21(a)(i)
ii. Non-Federal Share	---	---	21(a)(ii)
b. Other Federal Operating Expenditures	10.24	39,796.54	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	10.24	39,796.54	21(c)
22. Transfers to Affiliated/Other Party Committees	---	---	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	---	7,500.00	23
24. Independent Expenditures (use Schedule E)	---	---	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	87.90	87.90	25
26. Loan Repayments Made	---	---	26
27. Loans Made	---	---	27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	---	---	28(a)
b. Political Party Committees	---	---	28(b)
c. Other Political Committees (such as PACs)	---	---	28(c)
d. Total Contribution Refunds (add a, b and c) ➤	---	---	28(d)
29. Other Disbursements	---	---	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	98.14	47,384.44	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	98.14	47,384.44	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	---	45,587.74	32
33. Total Contribution Refunds (from line 28d)	---	---	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	---	45,587.74	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	10.24	39,796.54	35
36. Offsets to Operating Expenditures (from line 15)	---	---	36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	10.24	39,796.54	37

FE8AN054

SCHEDULE A

ITEMIZED RECEIPTS
(Contributions from Individuals/Persons other than Political Committees)

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

PAGE 1 OF 1

FOR LINE NUMBER 11

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)
THE REPUBLICAN FINANCE COMMITTEE OF HAMILTON COUNTY

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
WE HAVE NOT RECEIVED ANY CONTRIBUTIONS DURING THIS REPORT PERIOD			
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional)	
TOTAL This Period (last page this line number only)	- 0 -

FE6A/N054

SCHEDULE B

ITEMIZED DISBURSEMENTS
(Operating Expenditures)

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

PAGE 1 OF 1

FOR LINE NUMBER 21b

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)
THE REPUBLICAN FINANCE COMMITTEE OF HAMILTON COUNTY

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
Fifth Third Bank Fountain Square Plaza Cincinnati, OH 45263	Checking Acct. Nov. Service Charge	12/7/98	$ 10.24
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

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

TOTAL This Period (last page this line number only) ..... $ 10.24

FEBA N064

SCHEDULE F

ITEMIZED COORDINATED EXPENDITURES MADE BY POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S) ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE (2 U.S.C. SEC. 441a(d))

(To be used only by Political Committees in the General Election)

Name of Political Committee (In Full)

HAMILTON COUNTY REPUBLICAN PARTY

Has your Committee been designated to make coordinated expenditures by a political committee? [X] YES [ ] NO

If YES, name the designating committee: OHIO REPUBLICAN PARTY

Full Name, Mailing Address and ZIP Code of Subordinate Committee

OHIO REPUBLICAN PARTY
211 S. FIFTH STREET
COLUMBUS, OH 43215

Full Name, Mailing Address and ZIP Code of Each Payee	Name of Federal Candidate Supported, State, District & Office Sought	Purpose of Expenditure	Date (month, day, year)	Amount
CINCINNATI ENQUIRER 312 ELM STREET CINCINNATI, OH 45202	SEE ALLOCATION BELOW Aggregate General Election Expenditure to this Candidate:		10-22-98	87.90
Full Name, Mailing Address and ZIP Code of Each Payee	**Name of Federal Candidate Supported, State, District & Office Sought**	**Purpose of Expenditure**	**Date (month, day, year)**	**Amount**
	GEORGE VOINOVICH US SENATE Aggregate General Election Expenditure to this Candidate: 29.30	NEWSPAPER ADVERTISEMENT	10-22-98	29.30 MEMO
Full Name, Mailing Address and ZIP Code of Each Payee	**Name of Federal Candidate Supported, State, District & Office Sought**	**Purpose of Expenditure**	**Date (month, day, year)**	**Amount**
	STEVE CHABOT US CONGRESS 1ST DISTRICT Aggregate General Election Expenditure to this Candidate: 29.30	NEWSPAPER ADVERTISING	10-22-98	29.30 MEMO
Full Name, Mailing Address and ZIP Code of Each Payee	**Name of Federal Candidate Supported, State, District & Office Sought**	**Purpose of Expenditure**	**Date (month, day, year)**	**Amount**
	ROB PORTMAN US CONGRESS 2ND DISTRICT Aggregate General Election Expenditure to this Candidate: 29.30	NEWSPAPER ADVERTISING	10-22-98	29.30 MEMO
SUBTOTAL of Expenditures This Page (optional)				87.90
TOTAL This Period (last page this line number only)				87.90

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	Date of Receipt
☐	First Class Mail	POSTMARKED
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☐	Received from the Senate Office of Public Records	Date of Receipt
☐	Other (Specify):	Postmarked _____ and/or Date of Receipt
☐	Electronic Filing	

am — PREPARER

1/28/99 — DATE PREPARED

(4/98)