

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
OHIOS FUTURE PAC

ADDRESS (number and street) 8405 INDIAN HILL ROAD
 Check if different than previously reported. (ACC)
CINCINNATI OH 45243

2. **FEC IDENTIFICATION NUMBER** C00440032
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 David S. Warren

Signature of Treasurer Electronically Filed by David S. Warren Date 04 14 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								
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FEC FORM 3X
(Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
OHIOS FUTURE 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		141001.79
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	141001.79									
(c) Total Receipts (from Line 19)	59040.00	59040.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	200041.79	200041.79								
7. Total Disbursements (from Line 31)	31609.77	31609.77								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	168432.02	168432.02								
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
OHIOS FUTURE 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	58600.00	58600.00
(i) Itemized (use Schedule A)	440.00	440.00
(ii) Unitemized	59040.00	59040.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	59040.00	59040.00
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 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))	59040.00	59040.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	59040.00	59040.00

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.....	26609.77	26609.77
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	26609.77	26609.77
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2000.00	2000.00
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.....	3000.00	3000.00
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))..	31609.77	31609.77
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	31609.77	31609.77

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	59040.00	59040.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	59040.00	59040.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	26609.77	26609.77
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	26609.77	26609.77

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

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

FOR LINE NUMBER: PAGE 6 / 33
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
OHIOS FUTURE PAC

A. Full Name (Last, First, Middle Initial)
James M Anderson

Mailing Address 9605 Shawnee Run Road

City State Zip Code
Cincinnati OH 45243

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

Name of Employer: Cincinnati Childrens Hospital
Occupation: President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 01 / 07 / 2008
Transaction ID: 80123.C210
 Amount of Each Receipt this Period: 1000.00
 Receipt

B. Full Name (Last, First, Middle Initial)
Thomas P Atkins

Mailing Address 1201 Edgecliff Place

City State Zip Code
Cincinnati OH 45206

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

Name of Employer: Retired
Occupation: Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 01 / 09 / 2008
Transaction ID: 80123.C212
 Amount of Each Receipt this Period: 5000.00
 Receipt

C. Full Name (Last, First, Middle Initial)
Susan F Castellini

Mailing Address 2180 Grandin Road

City State Zip Code
Cincinnati OH 45208

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

Name of Employer: None
Occupation: Volunteer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 01 / 12 / 2008
Transaction ID: 80123.C221
 Amount of Each Receipt this Period: 5000.00
 Receipt

SUBTOTAL of Receipts This Page (optional) ► 11000.00

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

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

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

FOR LINE NUMBER: PAGE 7 / 33
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
OHIOS FUTURE PAC

A. Full Name (Last, First, Middle Initial)
John W Hayden
Mailing Address P.O. Box 1256

City State Zip Code
Amelia OH 45102

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

Name of Employer Occupation
The Midland Company President & CEO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
01 / 07 / 2008
Transaction ID: 80123.C235
Amount of Each Receipt this Period
1000.00
Receipt

B. Full Name (Last, First, Middle Initial)
David Herche
Mailing Address 4955 Spring Grove

City State Zip Code
Cincinnati OH 45232

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

Name of Employer Occupation
Enerfab Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
02 / 27 / 2008
Transaction ID: 80322.C292
Amount of Each Receipt this Period
5000.00
Receipt

C. Full Name (Last, First, Middle Initial)
Thomas L Neyer, Jr
Mailing Address 410 Torrence Ct

City State Zip Code
Cincinnati OH 45202

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

Name of Employer Occupation
Neyer Holdings President & CEO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
01 / 07 / 2008
Transaction ID: 80123.C258
Amount of Each Receipt this Period
1000.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 7000.00

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 8 / 33
	<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)
OHIOS FUTURE PAC

A.	Full Name (Last, First, Middle Initial) Daniel R Rolfes	Date of Receipt MM / DD / YYYY 03 / 01 / 2008
	Mailing Address 1252 Goshen Pike	Transaction ID: 80322.C290
	City State Zip Code Milford OH 45150	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Holiday Homes President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00	

B.	Full Name (Last, First, Middle Initial) Larry A Sheakley	Date of Receipt MM / DD / YYYY 03 / 15 / 2008
	Mailing Address 100 Merchant Street	Transaction ID: 80322.C298
	City State Zip Code Cincinnati OH 45246	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Sheakley Co. CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) John M Tew	Date of Receipt MM / DD / YYYY 03 / 19 / 2008
	Mailing Address 8 Corbin Drive	Transaction ID: 80405.C302
	City State Zip Code Cincinnati OH 45208	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Mayfield Group Physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	4000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 33
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
OHIOS FUTURE PAC

<p>A. Full Name (Last, First, Middle Initial) William J Keating</p> <p>Mailing Address 2959 Alpine Terrace</p> <p>City State Zip Code Cincinnati OH 45208</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired Occupation Retired</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1000.00</p>	<p>Date of Receipt MM / DD / YYYY 02 / 13 / 2008</p> <p>Transaction ID: 80223.C280</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>Receipt</p>
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<p>B. Full Name (Last, First, Middle Initial) Paul Allaer</p> <p>Mailing Address 9669 Lansford Drive</p> <p>City State Zip Code Cincinnati OH 45242</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Thompson Hine LLP Occupation Attorney</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1000.00</p>	<p>Date of Receipt MM / DD / YYYY 02 / 13 / 2008</p> <p>Transaction ID: 80223.C281</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>Receipt</p>
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<p>C. Full Name (Last, First, Middle Initial) Thomas G Cody</p> <p>Mailing Address 100 Rivercenter Boulevard, PH. 3-C</p> <p>City State Zip Code Covington KY 41011</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Macys, Inc. Occupation Executive</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 5000.00</p>	<p>Date of Receipt MM / DD / YYYY 02 / 20 / 2008</p> <p>Transaction ID: 80223.C283</p> <p>Amount of Each Receipt this Period 5000.00</p> <p>Receipt</p>
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SUBTOTAL of Receipts This Page (optional)	7000.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 33
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
OHIOS FUTURE PAC

A.	Full Name (Last, First, Middle Initial) David W Warner		Date of Receipt
	Mailing Address 8880 Old Indian Hill Road		<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Cincinnati	OH	45243
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Hunt Development Corp.		Occupation Real Estate Developer	Transaction ID: 80223.C284
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="5000.00"/>
		<input type="text" value="5000.00"/>	Receipt

B.	Full Name (Last, First, Middle Initial) Victoria Buyniski Gluckman		Date of Receipt
	Mailing Address 3 Grandin Lane		<input type="text" value="02"/> / <input type="text" value="20"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Cincinnati	OH	45208-3358
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer United Medical Resources		Occupation CEO	Transaction ID: 80223.C285
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="5000.00"/>
		<input type="text" value="5000.00"/>	Receipt

C.	Full Name (Last, First, Middle Initial) Richard A Weiland		Date of Receipt
	Mailing Address 2444 Madison Road, Apt. 1406		<input type="text" value="02"/> / <input type="text" value="13"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Cincinnati	OH	45208
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Richard Consulting Co.		Occupation Lobbyist	Transaction ID: 80223.C286
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="2000.00"/>
		<input type="text" value="2000.00"/>	Receipt

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="12000.00"/>
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 11 / 33
	<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)
OHIOS FUTURE PAC

A.	Full Name (Last, First, Middle Initial) Rene J Robichaud		Date of Receipt
	Mailing Address 8130 Indian Hill Road		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Cincinnati	OH	45243
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Retired		Occupation Retired	Transaction ID: 80316.C287
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="1000.00"/>
		<input type="text" value="1000.00"/>	Receipt

B.	Full Name (Last, First, Middle Initial) Richard T Farmer		Date of Receipt
	Mailing Address 6847 Cintas Blvd Suite 120		<input type="text" value="03"/> / <input type="text" value="07"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Mason	OH	45040
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Cintas Corporation		Occupation Chairman of the Board	Transaction ID: 80322.C293
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="4000.00"/>
		<input type="text" value="4000.00"/>	Receipt

C.	Full Name (Last, First, Middle Initial) Lee A Carter		Date of Receipt
	Mailing Address 1240 W Rookwood Drive		<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Cincinnati	OH	45208-3338
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Retired		Occupation Retired	Transaction ID: 80322.C294
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="1000.00"/>
		<input type="text" value="1000.00"/>	Receipt

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="6000.00"/>
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: PAGE 12 / 33
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
OHIOS FUTURE PAC

A. Full Name (Last, First, Middle Initial)
Joyce E Farmer

Mailing Address 8525 Fox Cub Lane

City State Zip Code
Cincinnati OH 45243-1023

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
03 / 07 / 2008

Transaction ID: 80322.C295

Amount of Each Receipt this Period
600.00

Receipt

B. Full Name (Last, First, Middle Initial)
John F Barrett

Mailing Address 9300 Shawnee Run Road

City State Zip Code
Cincinnati OH 45243

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

Name of Employer Occupation
Western & Southern CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2008

Transaction ID: 80322.C296

Amount of Each Receipt this Period
5000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Stephen P Donovan, Jr

Mailing Address 1885 William Howard Taft Road

City State Zip Code
Cincinnati OH 45206

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2008

Transaction ID: 80322.C297

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **6600.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 / 33
	(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

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)
OHIOS FUTURE PAC

A.	Full Name (Last, First, Middle Initial) Lon W Deckard		Date of Receipt
	Mailing Address 915 MacEwen Drive		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Osprey	FL	34229
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
	Name of Employer Self-Employed	Occupation Retailer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	Transaction ID: 80403.C301
			Amount of Each Receipt this Period <input type="text" value="5000.00"/>
			Receipt

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="5000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="58600.00"/>

**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"/> 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

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)
OHIOS FUTURE PAC

A.	Full Name (Last, First, Middle Initial) Roger J Pelletier	Transaction ID: 80410.E77 Date of Disbursement 03 / 17 / 2008
	Mailing Address 7348 State Road	Amount of Each Disbursement this Period 1919.32
	City Cincinnati State OH Zip Code 45230-	
	Purpose of Disbursement Reimbursement (See Below) Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		REIMBURSEMENT (SEE BELOW)

B.	Full Name (Last, First, Middle Initial) Roger J Pelletier	Transaction ID: 80410.E78 Date of Disbursement 03 / 17 / 2008
	Mailing Address 7348 State Road	Amount of Each Disbursement this Period 1800.00
	City Cincinnati State OH Zip Code 45230-	
	Purpose of Disbursement Pilot Fees Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: PILOT FEES

C.	Full Name (Last, First, Middle Initial) Bricker & Eckler LLP	Transaction ID: 80322.E39 Date of Disbursement 02 / 24 / 2008
	Mailing Address 100 South Third Street	Amount of Each Disbursement this Period 3150.00
	City Columbus State OH Zip Code 43215-	
	Purpose of Disbursement Professional Fees Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PROFESSIONAL FEES

SUBTOTAL of Disbursements This Page (optional)	5069.32
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)

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

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NAME OF COMMITTEE (In Full)
OHIOS FUTURE PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Fifth Third Bank</p> <p>Mailing Address 38 Fountain Square Plaza</p> <p>City Cincinnati State OH Zip Code 45202-</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80410.E58 Date of Disbursement 03 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 283.50</p> <p>PAYROLL TAXES</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Anthem BCBS OH</p> <p>Mailing Address PO Box 105095</p> <p>City Atlanta State GA Zip Code 30348-5095</p> <p>Purpose of Disbursement Health Insurance Premium</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80410.E87 Date of Disbursement 03 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 205.98</p> <p>HEALTH INSURANCE PREMIUM</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Fifth Third Bank</p> <p>Mailing Address 38 Fountain Square Plaza</p> <p>City Cincinnati State OH Zip Code 45202-</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80322.E37 Date of Disbursement 02 / 14 / 2008</p> <p>Amount of Each Disbursement this Period 283.50</p> <p>PAYROLL TAXES</p>

SUBTOTAL of Disbursements This Page (optional) ▶

772.98

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"/> 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)
OHIOS FUTURE PAC

<p>A. Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 7800 Montgomery Road</p> <p>City Cincinnati State OH Zip Code 45236-</p> <p>Purpose of Disbursement Office supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80403.E55</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> / <input type="text" value="02"/> / <input type="text" value="2008"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="8.30"/></p> <p>[MEMO ITEM] MEMO: OFFICE SUPPLIES</p>
<p>B. Full Name (Last, First, Middle Initial) US Postal Service</p> <p>Mailing Address 1591 Dalton Avenue</p> <p>City Cincinnati State OH Zip Code 45234-</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80403.E56</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> / <input type="text" value="02"/> / <input type="text" value="2008"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="7.38"/></p> <p>[MEMO ITEM] MEMO: POSTAGE</p>
<p>C. Full Name (Last, First, Middle Initial) Bricker & Eckler LLP</p> <p>Mailing Address 100 South Third Street</p> <p>City Columbus State OH Zip Code 43215-</p> <p>Purpose of Disbursement Professional Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80316.E34</p> <p>Date of Disbursement</p> <p><input type="text" value="01"/> / <input type="text" value="05"/> / <input type="text" value="2008"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="613.75"/></p> <p>PROFESSIONAL FEES</p>

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)

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

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NAME OF COMMITTEE (In Full)
OHIOS FUTURE PAC

A. Full Name (Last, First, Middle Initial) Bricker & Eckler LLP Mailing Address 100 South Third Street City Columbus State OH Zip Code 43215- Purpose of Disbursement Telephone & Delivery Charges Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80322.E40 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 4 / 2 0 0 8
	Amount of Each Disbursement this Period 0.97 TELEPHONE & DELIVERY CHARGES

B. Full Name (Last, First, Middle Initial) One Charlie Victor LLC Mailing Address 4228 Airport Road City Cincinnati State OH Zip Code 45226- Purpose of Disbursement Airplane Rental Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80410.E61 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 8
	Amount of Each Disbursement this Period 1996.88 AIRPLANE RENTAL

C. Full Name (Last, First, Middle Initial) Jim Morrell Mailing Address 1001 N Pitt Street City Alexandria State VA Zip Code 22314- Purpose of Disbursement Speech Preparation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80322.E36 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00 SPEECH PREPARATION

SUBTOTAL of Disbursements This Page (optional) ▶	2997.85
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)

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

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NAME OF COMMITTEE (In Full)
OHIOS FUTURE PAC

A.	Full Name (Last, First, Middle Initial) Anchor Equipment Leasing LLC	Transaction ID: 80410.E85 Date of Disbursement 03 / 19 / 2008
	Mailing Address 128 East 2nd Street	Amount of Each Disbursement this Period 669.24
	City Covington State KY Zip Code 41011-	
	Purpose of Disbursement Airplane Fuel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		AIRPLANE FUEL

B.	Full Name (Last, First, Middle Initial) Andrew D. Ciafardini	Transaction ID: 80316.E33 Date of Disbursement 03 / 15 / 2008
	Mailing Address 4950 YMCA Drive	Amount of Each Disbursement this Period 5224.42
	City Cincinnati State OH Zip Code 45242-	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

C.	Full Name (Last, First, Middle Initial) Anchor Equipment Leasing LLC	Transaction ID: 80410.E84 Date of Disbursement 03 / 19 / 2008
	Mailing Address 128 East 2nd Street	Amount of Each Disbursement this Period 864.81
	City Covington State KY Zip Code 41011-	
	Purpose of Disbursement Plane Rental Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PLANE RENTAL

SUBTOTAL of Disbursements This Page (optional)	▶	6758.47
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)

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

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NAME OF COMMITTEE (In Full)
OHIOS FUTURE PAC

<p>A. Full Name (Last, First, Middle Initial) Nancy R. Aichholz</p> <p>Mailing Address 8405 Indian Hill Road</p> <p>City Cincinnati State OH Zip Code 45243-</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80316.E31 Date of Disbursement 02 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 1304.40</p> <p>PAYROLL</p>
<p>B. Full Name (Last, First, Middle Initial) Bricker & Eckler LLP</p> <p>Mailing Address 100 South Third Street</p> <p>City Columbus State OH Zip Code 43215-</p> <p>Purpose of Disbursement Telephone & Delivery Charges</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80410.E60 Date of Disbursement 03 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 5.25</p> <p>TELEPHONE & DELIVERY CHARGES</p>
<p>C. Full Name (Last, First, Middle Initial) Bricker & Eckler LLP</p> <p>Mailing Address 100 South Third Street</p> <p>City Columbus State OH Zip Code 43215-</p> <p>Purpose of Disbursement Telephone & Delivery Charges</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80316.E35 Date of Disbursement 01 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 2.73</p> <p>TELEPHONE & DELIVERY CHARGES</p>

SUBTOTAL of Disbursements This Page (optional)	1312.38
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"/> 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)
OHIOS FUTURE PAC

A.

Full Name (Last, First, Middle Initial)
Susan B Keffer

Mailing Address 705 Miami Avenue

City Terrace Park State OH Zip Code 45174-

Purpose of Disbursement
Reimbursement (See Below)

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80410.E68
Date of Disbursement

/ /

Amount of Each Disbursement this Period

REIMBURSEMENT (SEE BELOW)

B.

Full Name (Last, First, Middle Initial)
Susan B Keffer

Mailing Address 705 Miami Avenue

City Terrace Park State OH Zip Code 45174-

Purpose of Disbursement
Mileage Reimbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80410.E69
Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]
MEMO: MILEAGE REIMBURSEMENT

C.

Full Name (Last, First, Middle Initial)
Staples

Mailing Address 7800 Montgomery Road

City Cincinnati State OH Zip Code 45236-

Purpose of Disbursement
Office Supplies

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80410.E70
Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]
MEMO: OFFICE SUPPLIES

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

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NAME OF COMMITTEE (In Full)
OHIOS FUTURE PAC

A.

Full Name (Last, First, Middle Initial)
Susan B Keffer

Mailing Address 705 Miami Avenue

City Terrace Park State OH Zip Code 45174-

Purpose of Disbursement
Reimbursement (See Below)

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80322.E51
Date of Disbursement

/ /

Amount of Each Disbursement this Period

REIMBURSEMENT (SEE BELOW)

B.

Full Name (Last, First, Middle Initial)
Susan B Keffer

Mailing Address 705 Miami Avenue

City Terrace Park State OH Zip Code 45174-

Purpose of Disbursement
Mileage Reimbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80322.E52
Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]
MEMO: MILEAGE REIMBURSEMENT

C.

Full Name (Last, First, Middle Initial)
Staples

Mailing Address 7800 Montgomery Road

City Cincinnati State OH Zip Code 45236-

Purpose of Disbursement
Office Supplies

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80322.E49
Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]
MEMO: OFFICE SUPPLIES

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

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NAME OF COMMITTEE (In Full)
OHIOS FUTURE PAC

A. Full Name (Last, First, Middle Initial)
Andrew D. Ciafardini

Mailing Address 4950 YMCA Drive

City Cincinnati State OH Zip Code 45242-

Purpose of Disbursement Reimbursement (See Below)

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 80410.E89
Date of Disbursement 03 / 30 / 2008

Amount of Each Disbursement this Period 799.80

REIMBURSEMENT (SEE BELOW)

B. Full Name (Last, First, Middle Initial)
Andrew D. Ciafardini

Mailing Address 4950 YMCA Drive

City Cincinnati State OH Zip Code 45242-

Purpose of Disbursement Mileage Reimbursement

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 80410.E90
Date of Disbursement 03 / 30 / 2008

Amount of Each Disbursement this Period 47.85

[MEMO ITEM]
MEMO: MILEAGE REIMBURSEMENT

C. Full Name (Last, First, Middle Initial)
Costco Wholesale

Mailing Address 1100 E Kemper Road

City Springdale State OH Zip Code 45246-

Purpose of Disbursement Office Equipment

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 80410.E100
Date of Disbursement 03 / 14 / 2008

Amount of Each Disbursement this Period 425.99

[MEMO ITEM]
MEMO: OFFICE EQUIPMENT

SUBTOTAL of Disbursements This Page (optional) ▶ 799.80

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"/> 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)
OHIOS FUTURE PAC

A.	Full Name (Last, First, Middle Initial) FedEx Kinkos	Transaction ID: 80410.E99
	Mailing Address 2712 Vine Street	Date of Disbursement MM / DD / YYYY 03 / 12 / 2008
	City Cincinnati State OH Zip Code 45219-	Amount of Each Disbursement this Period 9.17
	Purpose of Disbursement Printing	[MEMO ITEM] MEMO: PRINTING
	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.	Full Name (Last, First, Middle Initial) FedEx Kinkos	Transaction ID: 80410.E102
	Mailing Address 2712 Vine Street	Date of Disbursement MM / DD / YYYY 03 / 27 / 2008
	City Cincinnati State OH Zip Code 45219-	Amount of Each Disbursement this Period 28.14
	Purpose of Disbursement Delivery Charge	[MEMO ITEM] MEMO: DELIVERY CHARGE
	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:	

C.	Full Name (Last, First, Middle Initial) FedEx Kinkos	Transaction ID: 80410.E98
	Mailing Address 2712 Vine Street	Date of Disbursement MM / DD / YYYY 03 / 12 / 2008
	City Cincinnati State OH Zip Code 45219-	Amount of Each Disbursement this Period 25.56
	Purpose of Disbursement Photocopies	[MEMO ITEM] MEMO: PHOTOCOPIES
	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:	

SUBTOTAL of Disbursements This Page (optional)	0.00
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"/> 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)
OHIOS FUTURE PAC

A.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: 80410.E96 Date of Disbursement 03 / 27 / 2008
	Mailing Address 7800 Montgomery Road	Amount of Each Disbursement this Period 29.99
	City Cincinnati State OH Zip Code 45236-	
	Purpose of Disbursement Office Supplies	[MEMO ITEM] MEMO: OFFICE SUPPLIES
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: 80410.E97 Date of Disbursement 03 / 28 / 2008
	Mailing Address 7800 Montgomery Road	Amount of Each Disbursement this Period 82.50
	City Cincinnati State OH Zip Code 45236-	
	Purpose of Disbursement Office Supplies	[MEMO ITEM] MEMO: OFFICE SUPPLIES
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: 80410.E93 Date of Disbursement 03 / 09 / 2008
	Mailing Address 7800 Montgomery Road	Amount of Each Disbursement this Period 11.70
	City Cincinnati State OH Zip Code 45236-	
	Purpose of Disbursement Office Supplies	[MEMO ITEM] MEMO: OFFICE SUPPLIES
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	0.00
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"/> 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)
OHIOS FUTURE PAC

A. Full Name (Last, First, Middle Initial) Staples Mailing Address 7800 Montgomery Road City Cincinnati State OH Zip Code 45236- Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80410.E92 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 7 / 2 0 0 8
	Amount of Each Disbursement this Period 28.73 [MEMO ITEM] MEMO: OFFICE SUPPLIES

B. Full Name (Last, First, Middle Initial) US Postal Service Mailing Address 1591 Dalton Avenue City Cincinnati State OH Zip Code 45234- Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80410.E101 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 5 / 2 0 0 8
	Amount of Each Disbursement this Period 7.59 [MEMO ITEM] MEMO: POSTAGE

C. Full Name (Last, First, Middle Initial) State of Ohio Treasurer Mailing Address 9th Floor 30 East Broad Street City Columbus State OH Zip Code 43215- Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80412.E104 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 8 / 2 0 0 8
	Amount of Each Disbursement this Period 380.38 PAYROLL TAXES

SUBTOTAL of Disbursements This Page (optional) ▶	380.38
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"/> 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)
OHIOS FUTURE PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Bricker & Eckler LLP</p> <p>Mailing Address 100 South Third Street</p> <p>City Columbus State OH Zip Code 43215-</p> <p>Purpose of Disbursement Professional Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80410.E59</p> <p>Date of Disbursement 03 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 1636.25</p> <p>PROFESSIONAL FEES</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Fifth Third Bank</p> <p>Mailing Address 38 Fountain Square Plaza</p> <p>City Cincinnati State OH Zip Code 45202-</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80410.E83</p> <p>Date of Disbursement 03 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 2739.25</p> <p>PAYROLL TAXES</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Nancy R. Aichholz</p> <p>Mailing Address 8405 Indian Hill Road</p> <p>City Cincinnati State OH Zip Code 45243-</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80316.E32</p> <p>Date of Disbursement 03 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 1304.40</p> <p>PAYROLL</p>

SUBTOTAL of Disbursements This Page (optional)	5679.90
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)

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

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NAME OF COMMITTEE (In Full)
OHIOS FUTURE PAC

A.

Full Name (Last, First, Middle Initial)
Nancy R. Aichholz

Mailing Address 8405 Indian Hill Road

City Cincinnati State OH Zip Code 45243-

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80316.E30

Date of Disbursement

01 / 16 / 2008

Amount of Each Disbursement this Period

1304.40

PAYROLL

B.

Full Name (Last, First, Middle Initial)
Kevin Hoggatt

Mailing Address c/o Squire Sanders & Dempsey LLP
221 E Fourth Street

City Cincinnati State OH Zip Code 45202-

Purpose of Disbursement
Reimbursement (See Below)

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80322.E44

Date of Disbursement

02 / 24 / 2008

Amount of Each Disbursement this Period

243.03

REIMBURSEMENT (SEE BELOW)

C.

Full Name (Last, First, Middle Initial)
FedEx Kinkos

Mailing Address 2712 Vine Street

City Cincinnati State OH Zip Code 45219-

Purpose of Disbursement
Photocopies

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80322.E47

Date of Disbursement

02 / 01 / 2008

Amount of Each Disbursement this Period

14.91

[MEMO ITEM]
MEMO: PHOTOCOPIES

SUBTOTAL of Disbursements This Page (optional) ▶

1547.43

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)

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

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NAME OF COMMITTEE (In Full)
OHIOS FUTURE PAC

A.	Full Name (Last, First, Middle Initial) FedEx Kinkos Mailing Address 2712 Vine Street City Cincinnati State OH Zip Code 45219- Purpose of Disbursement Delivery Charge Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80322.E46 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 0 8	Amount of Each Disbursement this Period 15.82 [MEMO ITEM] MEMO: DELIVERY CHARGE
B.	Full Name (Last, First, Middle Initial) Kevin Hoggatt Mailing Address c/o Squire Sanders & Dempsey LLP 221 E Fourth Street City Cincinnati State OH Zip Code 45202- Purpose of Disbursement Mileage Reimbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80322.E45 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 4 / 2 0 0 8	Amount of Each Disbursement this Period 150.80 [MEMO ITEM] MEMO: MILEAGE REIMBURSEMENT
C.	Full Name (Last, First, Middle Initial) Kevin Hoggatt Mailing Address c/o Squire Sanders & Dempsey LLP 221 E Fourth Street City Cincinnati State OH Zip Code 45202- Purpose of Disbursement Reimbursement (See Below) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80410.E71 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 7 / 2 0 0 8	Amount of Each Disbursement this Period 146.16 REIMBURSEMENT (SEE BELOW)

SUBTOTAL of Disbursements This Page (optional) ▶

146.16

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)

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

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NAME OF COMMITTEE (In Full)
OHIOS FUTURE PAC

<p>A. Full Name (Last, First, Middle Initial) FedEx Kinkos</p> <p>Mailing Address 2712 Vine Street</p> <p>City Cincinnati State OH Zip Code 45219-</p> <p>Purpose of Disbursement Photocopies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80410.E75 Date of Disbursement: 02 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 59.90</p> <p>[MEMO ITEM] MEMO: PHOTOCOPIES</p>
<p>B. Full Name (Last, First, Middle Initial) FedEx Kinkos</p> <p>Mailing Address 2712 Vine Street</p> <p>City Cincinnati State OH Zip Code 45219-</p> <p>Purpose of Disbursement Delivery Charge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80410.E76 Date of Disbursement: 02 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 8.19</p> <p>[MEMO ITEM] MEMO: DELIVERY CHARGE</p>
<p>C. Full Name (Last, First, Middle Initial) FedEx Kinkos</p> <p>Mailing Address 2712 Vine Street</p> <p>City Cincinnati State OH Zip Code 45219-</p> <p>Purpose of Disbursement Photocopies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80410.E74 Date of Disbursement: 02 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 25.65</p> <p>[MEMO ITEM] MEMO: PHOTOCOPIES</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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)

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

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NAME OF COMMITTEE (In Full)
OHIOS FUTURE PAC

A.	Full Name (Last, First, Middle Initial) Kevin Hoggatt	Transaction ID: 80410.E73 Date of Disbursement MM / DD / YYYY 02 / 22 / 2008
	Mailing Address c/o Squire Sanders & Dempsey LLP 221 E Fourth Street	Amount of Each Disbursement this Period 21.97
	City Cincinnati State OH Zip Code 45202-	
	Purpose of Disbursement Mileage Reimbursement Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: MILEAGE REIMBURSEMENT

B.	Full Name (Last, First, Middle Initial) Kevin Hoggatt	Transaction ID: 80410.E72 Date of Disbursement MM / DD / YYYY 02 / 12 / 2008
	Mailing Address c/o Squire Sanders & Dempsey LLP 221 E Fourth Street	Amount of Each Disbursement this Period 30.45
	City Cincinnati State OH Zip Code 45202-	
	Purpose of Disbursement Mileage Reimbursement Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: MILEAGE REIMBURSEMENT

C.	Full Name (Last, First, Middle Initial) Nancy R. Aichholz	Transaction ID: 80410.E62 Date of Disbursement MM / DD / YYYY 03 / 16 / 2008
	Mailing Address 8405 Indian Hill Road	Amount of Each Disbursement this Period 135.82
	City Cincinnati State OH Zip Code 45243-	
	Purpose of Disbursement Reimbursement (See Below) Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		REIMBURSEMENT (SEE BELOW)

SUBTOTAL of Disbursements This Page (optional)	▶	135.82
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"/> 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)
OHIOS FUTURE PAC

A.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: 80410.E64 Date of Disbursement MM / DD / YYYY 02 / 04 / 2008
	Mailing Address 7800 Montgomery Road	Amount of Each Disbursement this Period 32.77
	City Cincinnati State OH Zip Code 45236-	
	Purpose of Disbursement Office Supplies	[MEMO ITEM] MEMO: OFFICE SUPPLIES
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: 80410.E65 Date of Disbursement MM / DD / YYYY 01 / 16 / 2008
	Mailing Address 7800 Montgomery Road	Amount of Each Disbursement this Period 21.05
	City Cincinnati State OH Zip Code 45236-	
	Purpose of Disbursement Office Supplies	[MEMO ITEM] MEMO: OFFICE SUPPLIES
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) US Postal Service	Transaction ID: 80410.E63 Date of Disbursement MM / DD / YYYY 03 / 15 / 2008
	Mailing Address 1591 Dalton Avenue	Amount of Each Disbursement this Period 82.00
	City Cincinnati State OH Zip Code 45234-	
	Purpose of Disbursement Postage	[MEMO ITEM] MEMO: POSTAGE
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	26594.09

**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)

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<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)
OHIOS FUTURE PAC

A. Full Name (Last, First, Middle Initial) Dailey for Congress Mailing Address 13126 Miller Road City Mount Vernon State OH Zip Code 43050- Purpose of Disbursement CONTRIBUTION (G08) Candidate Name FRED L DAILEY Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 18 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80410.E66 Date of Disbursement 03 / 17 / 2008
	Amount of Each Disbursement this Period 1000.00 Category/Type CONTRIBUTION (G08)
B. Full Name (Last, First, Middle Initial) Schmidt for Congress Mailing Address 771 Wards Corner Road City Loveland State OH Zip Code 45140- Purpose of Disbursement CONTRIBUTION (G08) Candidate Name JEANNETTE H SCHMIDT Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 02 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80410.E88 Date of Disbursement 03 / 30 / 2008
	Amount of Each Disbursement this Period 1000.00 Category/Type CONTRIBUTION (G08)

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

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

2000.00

