

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

Checksmart Financial LLC Political Action Committee

ADDRESS (number and street) 7001 Post Road Suite 200 Dublin OH 43016

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00433805

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 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2)
 - Mar 20 (M3)
 - Apr 20 (M4)
 - May 20 (M5)
 - Jun 20 (M6)
 - Jul 20 (M7)
 - Aug 20 (M8)
 - Sep 20 (M9)
 - Oct 20 (M10)
 - Nov 20 (M11) (Non-Election Year Only)
 - Dec 20 (M12) (Non-Election Year Only)
 - Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P)
 - General (12G)
 - Runoff (12R)
 - Convention (12C)
 - Special (12S)

Election on [MM] / [DD] / [YYYY] in the State of []

- (d) 30-Day POST-Election Report for the:
- General (30G)
 - Runoff (30R)
 - Special (30S)

Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period [MM] / [DD] / [YYYY] 04 / 01 / 2014 through [MM] / [DD] / [YYYY] 06 / 30 / 2014

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 Bridgette Caryn Roman

Signature of Treasurer *Bridgette Caryn Roman* [Electronically Filed] Date 07 / 15 / 2014

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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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Checksmart Financial LLC Political Action Committee

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="186647.35"/>	<input type="text" value="186647.35"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="165107.21"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="28926.04"/>	<input type="text" value="53203.72"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="194033.25"/>	<input type="text" value="239851.07"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="16470.50"/>	<input type="text" value="62288.32"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="177562.75"/>	<input type="text" value="177562.75"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Checksmart Financial LLC Political Action Committee

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	26441.04	48473.72
(ii) Unitemized	1485.00	3730.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	27926.04	52203.72
(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)	27926.04	52203.72
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.....	1000.00	1000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	28926.04	53203.72
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	28926.04	53203.72

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	170.50	238.32
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	170.50	238.32
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	15250.00	22750.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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	1050.00	39300.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	16470.50	62288.32
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	16470.50	62288.32

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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)	27926.04	52203.72
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	27926.04	52203.72
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	170.50	238.32
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	170.50	238.32

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 25
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Checksmart Financial LLC Political Action Committee

A. Eric Austin
Full Name (Last, First, Middle Initial)

Mailing Address 6083 Nova Park Lane

City Hilliard State OH Zip Code 43026

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

Name of Employer Checksmart Financial LLC Occupation Vice President, Information Technology

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt **06 / 30 / 2014**

Transaction ID : SA11AI.6242

Amount of Each Receipt this Period **180.00**

Payroll Deduction of \$30.00 per biweekly pay

B. Lisa Barber
Full Name (Last, First, Middle Initial)

Mailing Address 1345 S. Kolb Road Apt 317

City Tuscon State AZ Zip Code 85710

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

Name of Employer Checksmart Financial LLC Occupation Auditor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **06 / 30 / 2014**

Transaction ID : SA11AI.6248

Amount of Each Receipt this Period **120.00**

Payroll Deduction of \$20.00 per biweekly pay

C. Josh T, Beatty
Full Name (Last, First, Middle Initial)

Mailing Address 7317 W. Montgomery Rd

City Peoria State AZ Zip Code 85383

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

Name of Employer Checksmart Financial LLC Occupation Regional Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **550.00**

Date of Receipt **06 / 30 / 2014**

Transaction ID : SA11AI.6238

Amount of Each Receipt this Period **300.00**

Payroll Deduction of \$50.00 per biweekly pay

SUBTOTAL of Receipts This Page (optional)..... **600.00**

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 7 OF 25
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Checksmart Financial LLC Political Action Committee

Full Name (Last, First, Middle Initial) A. Timothy Bushman		Date of Receipt MM / DD / YYYY 06 / 30 / 2014 Transaction ID : SA11AI.6249
Mailing Address 2014 NE 2nd Street		Amount of Each Receipt this Period 120.00 Payroll Deduction of \$20.00 per biweekly pay
City Blue Springs	State MO	Zip Code 64014
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 220.00
Name of Employer Checksmart Financial LLC	Occupation District Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. William Chapman		Date of Receipt MM / DD / YYYY 06 / 30 / 2014 Transaction ID : SA11AI.6219
Mailing Address 848 Gummer Court		Amount of Each Receipt this Period 1200.00 Payroll Deduction of \$200.00 per biweekly pay
City Reynoldsburg	State OH	Zip Code 43068
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 2200.00
Name of Employer Checksmart Financial LLC	Occupation Director of Loss Prevention	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Jason Creel		Date of Receipt MM / DD / YYYY 06 / 30 / 2014 Transaction ID : SA11AI.6213
Mailing Address 620 Valley Street		Amount of Each Receipt this Period 1249.98 Payroll Deduction of \$208.33 per biweekly pay
City Hoover	State AL	Zip Code 35226
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 2291.63
Name of Employer Checksmart Financial LLC	Occupation District Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	2569.98
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 OF 25
	<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)
Checksmart Financial LLC Political Action Committee

Full Name (Last, First, Middle Initial) A. Eunice Cruz		Date of Receipt MM / DD / YYYY 06 / 30 / 2014 Transaction ID : SA11AI.6243
Mailing Address 8030 W. Black Eagle Ct.		Amount of Each Receipt this Period 180.00 Payroll Deduction of \$30.00 per biweekly pay
City Tucson	State AZ	Zip Code 85757
FEC ID number of contributing federal political committee. C		
Name of Employer Checksmart Financial LLC	Occupation District Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

Full Name (Last, First, Middle Initial) B. Greyson Eves		Date of Receipt MM / DD / YYYY 06 / 30 / 2014 Transaction ID : SA11AI.6234
Mailing Address 959 Turcotte Drive		Amount of Each Receipt this Period 600.00 Payroll Deduction of \$100.00 per biweekly pay
City Gahanna	State OH	Zip Code 43203
FEC ID number of contributing federal political committee. C		
Name of Employer Checksmart Financial LLC	Occupation Vice President/Controller	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

Full Name (Last, First, Middle Initial) C. Jennifer Fisher		Date of Receipt MM / DD / YYYY 06 / 30 / 2014 Transaction ID : SA11AI.6228
Mailing Address 6000 Falling Rain Ct.		Amount of Each Receipt this Period 990.00 Payroll Deduction of \$165.00 per biweekly pay
City Elk Grove	State CA	Zip Code 95757
FEC ID number of contributing federal political committee. C		
Name of Employer Checksmart Financial LLC	Occupation Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1815.00	

SUBTOTAL of Receipts This Page (optional).....▶	1770.00
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 9 OF 25
<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)
Checksmart Financial LLC Political Action Committee

A. Amanda Fox
Full Name (Last, First, Middle Initial)

Mailing Address 5522 Westerville Crossing Drive

City Westerville	State OH	Zip Code 43081
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FEC ID number of contributing federal political committee. **C**

Name of Employer Checksmart Financial LLC	Occupation Director of Training
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2014

Transaction ID : SA11AI.6235

Amount of Each Receipt this Period

600.00

Payroll Deduction of \$100.00 per biweekly pay

B. Rebecca Ryanne Fox
Full Name (Last, First, Middle Initial)

Mailing Address 485 87th Street #8

City Daly City	State CA	Zip Code 94015
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FEC ID number of contributing federal political committee. **C**

Name of Employer Checksmart Financial LLC	Occupation Regional Counsel
--	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1650.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2014

Transaction ID : SA11AI.6229

Amount of Each Receipt this Period

900.00

Payroll Deduction of \$150.00 per biweekly pay

C. Steven Fryer
Full Name (Last, First, Middle Initial)

Mailing Address 4690 Tuttle's Brook Drive

City Dublin	State OH	Zip Code 43016
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FEC ID number of contributing federal political committee. **C**

Name of Employer Checksmart Financial LLC	Occupation Director of Store Operations
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2291.63**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2014

Transaction ID : SA11AI.6214

Amount of Each Receipt this Period

1249.98

Payroll Deduction of \$208.33 per biweekly pay

SUBTOTAL of Receipts This Page (optional).....	2749.98
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 10 OF 25
<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)
Checksmart Financial LLC Political Action Committee

A. Robert Grenko
Full Name (Last, First, Middle Initial)

Mailing Address 3402 East Laurel Lane

City Phoenix State AZ Zip Code 85028

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

Name of Employer Checksmart Financial LLC Occupation Regional Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **2200.00**

Date of Receipt **06 / 30 / 2014**

Transaction ID : SA11AI.6220

Amount of Each Receipt this Period **1200.00**

Payroll Deduction of \$200.00 per biweekly pay

B. Robert Grieser
Full Name (Last, First, Middle Initial)

Mailing Address 6315 Moore Road

City Delaware State OH Zip Code 43015

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

Name of Employer Checksmart Financial LLC Occupation Vice President - Government Affairs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **2299.00**

Date of Receipt **06 / 30 / 2014**

Transaction ID : SA11AI.6212

Amount of Each Receipt this Period **1254.00**

Payroll Deduction of \$209 per biweekly pay

C. Robert Heitzman
Full Name (Last, First, Middle Initial)

Mailing Address 4331 Vista Walk Lane

City Powell State OH Zip Code 43065

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

Name of Employer Checksmart Financial LLC Occupation Director of Store Development

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **2200.00**

Date of Receipt **06 / 30 / 2014**

Transaction ID : SA11AI.6221

Amount of Each Receipt this Period **1200.00**

Payroll Deduction of \$200.00 per biweekly pay

SUBTOTAL of Receipts This Page (optional).....▶	3654.00
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 11 OF 25
<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)
Checksmart Financial LLC Political Action Committee

A. Pagle Helterbrand
Full Name (Last, First, Middle Initial)
Mailing Address 16469 Middleburg Plain City Road

City Marysville	State OH	Zip Code 43040
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FEC ID number of contributing federal political committee. **C**

Name of Employer Checksmart Financial LLC	Occupation Vice President of Human Resources
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2370.00

Date of Receipt
06 / 30 / 2014
Transaction ID : SA11AI.6257

Amount of Each Receipt this Period
60.00

Payroll Deduction of \$10.00 per pay

B. Stacy Howler
Full Name (Last, First, Middle Initial)
Mailing Address 383 Coldwell Court

City Gahanna	State OH	Zip Code 43230
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FEC ID number of contributing federal political committee. **C**

Name of Employer Checksmart Financial LLC	Occupation Regional Manager
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
06 / 30 / 2014
Transaction ID : SA11AI.6236

Amount of Each Receipt this Period
600.00

Payroll Deduction of \$100.00 per biweekly pay

C. Jon Ipp
Full Name (Last, First, Middle Initial)
Mailing Address 4950 S County Rd 300 E

City Liberty	State IN	Zip Code 47353
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FEC ID number of contributing federal political committee. **C**

Name of Employer Checksmart Financial LLC	Occupation Regional Vice President
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2200.00

Date of Receipt
06 / 30 / 2014
Transaction ID : SA11AI.6222

Amount of Each Receipt this Period
1200.00

Payroll Deduction of \$200.00 per biweekly pay

SUBTOTAL of Receipts This Page (optional).....	1860.00
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 12 OF 25
<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)
Checksmart Financial LLC Political Action Committee

A. Kevin I. Johnson
Full Name (Last, First, Middle Initial)
Mailing Address 7852 Larchwood Street
City State Zip Code
Dublin OH 43016
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Checksmart Financial LLC District Manager
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
275.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2014
Transaction ID : SA11AI.6244
Amount of Each Receipt this Period
150.00
Payroll Deduction of \$25.00 per biweekly pay

B. Chris Jones
Full Name (Last, First, Middle Initial)
Mailing Address 14932 Mercury Lane
City State Zip Code
Huntertown IN 46748
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Checksmart Financial LLC District Manager
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
275.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2014
Transaction ID : SA11AI.6245
Amount of Each Receipt this Period
150.00
Payroll Deduction of \$25.00 per biweekly pay

C. Eric Kirk
Full Name (Last, First, Middle Initial)
Mailing Address 1440 SouthWabash Avenue, #407
City State Zip Code
Chicago IL 60605
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Checksmart Financial LLC Regional Manager
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
2200.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2014
Transaction ID : SA11AI.6224
Amount of Each Receipt this Period
1200.00
Payroll Deduction of \$200.00 per biweekly pay

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
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 13 OF 25
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Checksmart Financial LLC Political Action Committee

A. Richard D Lake
 Full Name (Last, First, Middle Initial)
 Mailing Address 4681 Fernway Drive
 City North Port State FL Zip Code 34288
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Checksmart Financial LLC Occupation Vice President of Store Development
 Receipt For: Primary General Other (specify)

Date of Receipt
 06 / 30 / 2014
Transaction ID : SA11AI.6237
 Amount of Each Receipt this Period
 600.00
 Payroll Deduction of \$100.00 per biweekly pay
 Aggregate Year-to-Date 1100.00

B. Catherine Meyers
 Full Name (Last, First, Middle Initial)
 Mailing Address 2187 Ransom Oaks Drive
 City Columbus State OH Zip Code 43228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Checksmart Financial LLC Occupation Controller/Director
 Receipt For: Primary General Other (specify)

Date of Receipt
 06 / 30 / 2014
Transaction ID : SA11AI.6241
 Amount of Each Receipt this Period
 270.00
 Payroll Deduction of \$45.00 per biweekly pay
 Aggregate Year-to-Date 495.00

C. Sally Mulkey
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 161
 City Orient State OH Zip Code 43146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Checksmart Financial LLC Occupation Director of Internal Collections Op's
 Receipt For: Primary General Other (specify)

Date of Receipt
 06 / 30 / 2014
Transaction ID : SA11AI.6246
 Amount of Each Receipt this Period
 150.00
 Payroll Deduction of \$25.00 per biweekly pay
 Aggregate Year-to-Date 275.00

SUBTOTAL of Receipts This Page (optional).....	1020.00
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 14 OF 25
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Checksmart Financial LLC Political Action Committee

Full Name (Last, First, Middle Initial) A. Lou Nash		Date of Receipt MM / DD / YYYY 06 / 30 / 2014 Transaction ID : SA11AI.6233
Mailing Address 7065 Stillwater Cove		Amount of Each Receipt this Period 639.12 Payroll Deduction of \$106.52 per biweekly pay
City Westerville	State OH	Zip Code 43082
FEC ID number of contributing federal political committee.	C	
Name of Employer Checksmart Financial LLC	Occupation Chief Recovery Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1115.20	

Full Name (Last, First, Middle Initial) B. Lauren Probst		Date of Receipt MM / DD / YYYY 06 / 30 / 2014 Transaction ID : SA11AI.6239
Mailing Address 9550 Shawnee Trail		Amount of Each Receipt this Period 300.00 Payroll Deduction of \$50.00 per biweekly pay
City Powell	State OH	Zip Code 43065
FEC ID number of contributing federal political committee.	C	
Name of Employer Checksmart Financial LLC	Occupation Director of Consumer Compliance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

Full Name (Last, First, Middle Initial) C. Larry Reisinger		Date of Receipt MM / DD / YYYY 06 / 30 / 2014 Transaction ID : SA11AI.6225
Mailing Address 731 Steeplechase St.		Amount of Each Receipt this Period 1200.00 Payroll Deduction of \$200.00 per biweekly pay
City Delaware	State OH	Zip Code 43015
FEC ID number of contributing federal political committee.	C	
Name of Employer Checksmart Financial LLC	Occupation Regional Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2200.00	

SUBTOTAL of Receipts This Page (optional).....▶	2139.12
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 OF 25
	<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)
Checksmart Financial LLC Political Action Committee

A. Bridgette Caryn Roman
 Full Name (Last, First, Middle Initial)
 Mailing Address 8825 Dunsinane Drive
 City State Zip Code
 Dublin OH 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Checksmart Financial LLC General Counsel/Vice President
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2288.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : SA11AI.6218
 Amount of Each Receipt this Period
 1248.00
 Payroll Deduction of \$208.00 per biweekly pay

B. John Rowe
 Full Name (Last, First, Middle Initial)
 Mailing Address 6130 Balmoral
 City State Zip Code
 Dublin OH 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Checksmart Financial LLC Senior Vice President of Marketing
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : SA11AI.6230
 Amount of Each Receipt this Period
 750.00
 Payroll Deduction of \$125.00 per biweekly pay

C. Robert Rubestek
 Full Name (Last, First, Middle Initial)
 Mailing Address 1605 Clarence Avenue
 City State Zip Code
 Lakewood OH 44107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Checksmart Financial LLC Regional Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : SA11AI.6247
 Amount of Each Receipt this Period
 150.00
 Payroll Deduction of \$25.00 per biweekly pay

SUBTOTAL of Receipts This Page (optional).....▶	2148.00
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 16 OF 25
<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)
Checksmart Financial LLC Political Action Committee

A. Christjahn Schnucker
Full Name (Last, First, Middle Initial)
Mailing Address 1031 Barclay Drive
City Galloway State OH Zip Code 43119
FEC ID number of contributing federal political committee. **C**
Name of Employer Checksmart Financial LLC Occupation Sr. VP Risk Management
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **2100.00**

Date of Receipt **06 / 30 / 2014**
Transaction ID : SA11AI.6227
Amount of Each Receipt this Period **1800.00**
Payroll Deduction of \$300.00 per biweekly pay

B. Lance D. Solomon
Full Name (Last, First, Middle Initial)
Mailing Address 2847 Lochgreen Way
City Dublin State CA Zip Code 94568
FEC ID number of contributing federal political committee. **C**
Name of Employer Checksmart Financial LLC Occupation Vice President- Special Projects
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **2291.63**

Date of Receipt **06 / 30 / 2014**
Transaction ID : SA11AI.6215
Amount of Each Receipt this Period **1249.98**
Payroll Deduction of \$208.33 per biweekly pay

C. Enrico Torres
Full Name (Last, First, Middle Initial)
Mailing Address 3580 Ballantree Place
City Dublin State OH Zip Code 43016
FEC ID number of contributing federal political committee. **C**
Name of Employer Checksmart Financial LLC Occupation Director of Store Operations
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **2291.63**

Date of Receipt **06 / 30 / 2014**
Transaction ID : SA11AI.6216
Amount of Each Receipt this Period **1249.98**
Payroll Deduction of \$208.33 per biweekly pay

SUBTOTAL of Receipts This Page (optional).....	4299.96
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 17 OF 25
<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)
Checksmart Financial LLC Political Action Committee

A. Lisa Vittorini
Full Name (Last, First, Middle Initial)

Mailing Address 4248 Vista Walk Lane

City Powell State OH Zip Code 43065

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

Name of Employer: Checksmart Financial LLC
Occupation: Director of Compliance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2200.00**

Date of Receipt: **06 / 30 / 2014**
Transaction ID : **SA11AI.6226**

Amount of Each Receipt this Period: **1200.00**

Payroll Deduction of \$200.00 per biweekly pay

B. Timothy Winslow
Full Name (Last, First, Middle Initial)

Mailing Address 3127 Stouenburgh Dr

City Hilliard State OH Zip Code 43026

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

Name of Employer: Checksmart Financial LLC
Occupation: Ass't General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **550.00**

Date of Receipt: **06 / 30 / 2014**
Transaction ID : **SA11AI.6240**

Amount of Each Receipt this Period: **300.00**

Payroll Deduction of \$50.00 per biweekly pay

C. Jerome Zingg
Full Name (Last, First, Middle Initial)

Mailing Address 4670 Pine Tree Court

City Westerville State OH Zip Code 43082

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

Name of Employer: Checksmart Financial LLC
Occupation: Senior VP Management Information Sys

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1150.00**

Date of Receipt: **06 / 30 / 2014**
Transaction ID : **SA11AI.6231**

Amount of Each Receipt this Period: **630.00**

Payroll Deduction of \$105.00 per biweekly pay

SUBTOTAL of Receipts This Page (optional).....▶	2130.00
TOTAL This Period (last page this line number only).....▶	26441.04

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

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

FOR LINE NUMBER: PAGE 18 OF 25
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Checksmart Financial LLC Political Action Committee

A. Committee to Elect Richard Adams
 Full Name (Last, First, Middle Initial)
 Mailing Address 1075 Hillcrest Drive
 City Troy State OH Zip Code 45373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 13 / 2014
Transaction ID : SA16.6211
 Amount of Each Receipt this Period
 1000.00
 Return of Campaign Contribution to State Candidate

B.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts 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)

<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)
Checksmart Financial LLC Political Action Committee

Full Name (Last, First, Middle Initial)

A. Huntington National Bank

Mailing Address 41 South High Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Bank Service Fee

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 15 / 2014

Transaction ID : SB21B.6208

Amount of Each Disbursement this Period

22.67

Full Name (Last, First, Middle Initial)

B. Huntington National Bank

Mailing Address 41 South High Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Bank Service Fee

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2014

Transaction ID : SB21B.6209

Amount of Each Disbursement this Period

21.84

Full Name (Last, First, Middle Initial)

C. Huntington National Bank

Mailing Address 41 South High Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Check Order Charges

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 11 / 2014

Transaction ID : SB21B.6207

Amount of Each Disbursement this Period

105.86

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

150.37

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Checksmart Financial LLC Political Action Committee

Full Name (Last, First, Middle Initial)

A. Huntington National Bank

Mailing Address 41 South High Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Bank Service Fee

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.6210

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
Checksmart Financial LLC Political Action Committee

Full Name (Last, First, Middle Initial)

A. ANN WAGNER FOR CONGRESS

Mailing Address PO BOX 50

City BALLWIN State MO Zip Code 63022

Purpose of Disbursement
Campaign Contribution

011

Candidate Name

ANN L. WAGNER

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MO District: 02

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 01 / 2014

Transaction ID : SB23.6161

Amount of Each Disbursement this Period

1250.00

Full Name (Last, First, Middle Initial)

B. BILL FOSTER FOR CONGRESS COMMITTEE

Mailing Address PO Box 703

City Geneva State IL Zip Code 60134

Purpose of Disbursement
Campaign Contribution

011

Candidate Name

G. WILLIAM (BILL) FOSTER

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: IL District: 11

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 01 / 2014

Transaction ID : SB23.6176

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. BILLY LONG FOR CONGRESS

Mailing Address 3246 E. RIDGEVIEW STREET

City SPRINGFIELD State MO Zip Code 65804

Purpose of Disbursement
Campaign Contribution

011

Candidate Name

BILLY LONG

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MO District: 07

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : SB23.6199

Amount of Each Disbursement this Period

1000.00

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

2750.00

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 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)

Checksmart Financial LLC Political Action Committee

Full Name (Last, First, Middle Initial)

A. FINANCIAL SERVICE CENTERS OF AMERICA, INC. PAC

Mailing Address COURT PLAZA NO. 21 MAIN ST,
PO BOX 647

City HACKENSACK State NJ Zip Code 07601

Purpose of Disbursement
PAC Contribution

012

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	1	4

Transaction ID : SB23.6185

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. FRIENDS OF JOHN DELANEY

Mailing Address PO BOX 70835

City BETHESDA State MD Zip Code 20813

Purpose of Disbursement
Campaign Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MD District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	4

Transaction ID : SB23.6178

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. MALONEY FOR CONGRESS

Mailing Address 49 EAST 92ND ST

City NEW YORK State NY Zip Code 10128

Purpose of Disbursement
Campaign Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NY District: 12

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	4

Transaction ID : SB23.6166

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

7	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

7	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

Checksmart Financial LLC Political Action Committee

Full Name (Last, First, Middle Initial)

A. MCFADDEN FOR SENATE

Mailing Address PO BOX 4039

City SAINT PAUL State MN Zip Code 55104

Purpose of Disbursement
Campaign Contribution

Candidate Name
MICHAEL MCFADDEN

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: MN District: 00

Date of Disbursement

MM / DD / YYYY
06 / 23 / 2014

Transaction ID : SB23.6197

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. MICHAEL GRIMM FOR CONGRESS

Mailing Address PO BOX 61806

City STATEN ISLAND State NY Zip Code 10306

Purpose of Disbursement
Campaign Contribution

Candidate Name
MICHAEL GRIMM

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: NY District: 11

Date of Disbursement

MM / DD / YYYY
04 / 01 / 2014

Transaction ID : SB23.6157

Amount of Each Disbursement this Period

1250.00

Full Name (Last, First, Middle Initial)

C. SHERMAN FOR CONGRESS

Mailing Address 777 S. FIGUEROA ST., STE. 4050

City LOS ANGELES State CA Zip Code 90017

Purpose of Disbursement
Campaign Contribution

Candidate Name
BRAD SHERMAN

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: CA District: 27

Date of Disbursement

MM / DD / YYYY
04 / 01 / 2014

Transaction ID : SB23.6165

Amount of Each Disbursement this Period

1000.00

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

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

3250.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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

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)

Checksmart Financial LLC Political Action Committee

Full Name (Last, First, Middle Initial)

A. WALBERG FOR CONGRESS

Mailing Address PO BOX 1362

City JACKSON State MI Zip Code 49204

Purpose of Disbursement
Campaign Contribution

Candidate Name

TIMOTHY L. HON. WALBERG

Office Sought: House
 Senate
 President
State: MI District: 07

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2014

Transaction ID : SB23.6205

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. WESTMORELAND FOR CONGRESS

Mailing Address P.O. BOX 458

City SHARPSBURG State GA Zip Code 30277

Purpose of Disbursement
Campaign Contribution

Candidate Name

LYNN A. WESTMORELAND

Office Sought: House
 Senate
 President
State: GA District: 03

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 01 / 2014

Transaction ID : SB23.6154

Amount of Each Disbursement this Period

1250.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

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

2250.00

15250.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Checksmart Financial LLC Political Action Committee

Full Name (Last, First, Middle Initial)

A. Citizens for Perales

Mailing Address 2766 Chatham Court

City State Zip Code
Beavercreek OH 45431

Purpose of Disbursement
State Candidate Campaign Committee

Candidate Name

Rick Perales

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SB29.6195

Amount of Each Disbursement this Period

800.00

B. Ohio House Democratic Women's Caucus

Mailing Address 340 East Fulton Street

City State Zip Code
Columbus OH 43215

Purpose of Disbursement
State PAC Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 27 / 2014

Transaction ID : SB29.6196

Amount of Each Disbursement this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

1050.00

1050.00