

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. 12FE4M5  
**Brad Wenstrup Victory Fund**

ADDRESS (number and street) PO Box 30844  
 Check if different than previously reported. (ACC) Bethesda MD 20824

2. **FEC IDENTIFICATION NUMBER** C C00617480 3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)  
CITY STATE ZIP CODE STATE DISTRICT

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)  
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on M M / D D / Y Y Y Y in the State of    
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on M M / D D / Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y 04 / 01 / 2016 through M M / D D / Y Y Y Y 06 / 30 / 2016

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 Robert E. Carroll CPA  
Signature of Treasurer Robert E. Carroll CPA [Electronically Filed] Date M M / D D / Y Y Y Y 07 / 15 / 2016

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

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

**Brad Wenstrup Victory Fund**

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2016 To: M M / D D / Y Y Y Y 06 / 30 / 2016

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	15465.00	15465.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	15465.00	15465.00
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	7306.25	7306.25
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	7306.25	7306.25
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	6050.00	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Brad Wenstrup Victory Fund**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	13150.00	13150.00
(ii) Unitemized.....	2315.00	2315.00
(iii) TOTAL of contributions from individuals ▶	15465.00	15465.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	15465.00	15465.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	15465.00	15465.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	7306.25	7306.25
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	2108.75	2108.75
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. 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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	9415.00	9415.00

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	15465.00
25. SUBTOTAL (add Line 23 and Line 24).....	15465.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	9415.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	6050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 16
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)  
**Brad Wenstrup Victory Fund**

**A.** Full Name (Last, First, Middle Initial)  
**Troy Blackburn**

Mailing Address 5155 Stone Barn Road

City Cincinnati State OH Zip Code 45243

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

Name of Employer Cincinnati Bengals Occupation Vice President

Receipt For:  Primary  General  Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **06 / 23 / 2016**

**Transaction ID : SA11AI.4172**

Amount of Each Receipt this Period **500.00**

Memo Item

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

Mailing Address 3574 East Kemper Road

City Cincinnati State OH Zip Code 45241

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

Name of Employer Loth, Inc. Occupation Chief Executive Officer

Receipt For:  Primary  General  Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **06 / 15 / 2016**

**Transaction ID : SA11AI.4130**

Amount of Each Receipt this Period **500.00**

Memo Item

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

Mailing Address 7275 Woodcroft Drive

City Cincinnati State OH Zip Code 45230

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

Name of Employer Packaging Associates Occupation Salesman

Receipt For:  Primary  General  Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **06 / 09 / 2016**

**Transaction ID : SA11AI.4132**

Amount of Each Receipt this Period **250.00**

Memo Item

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

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

**1250.00**

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

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

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NAME OF COMMITTEE (In Full)  
**Brad Wenstrup Victory Fund**

**A.** Full Name (Last, First, Middle Initial)  
**Charles Gerhardt III**

Mailing Address 700 Walnut Street  
Suite 450

City State Zip Code  
Cincinnati OH 45202

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

Name of Employer Occupation  
Government Strategies Group Consultant

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2016

**Transaction ID : SA11AI.4196**

Amount of Each Receipt this Period  
2500.00

Memo Item

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

Mailing Address 9075 Cunningham Road

City State Zip Code  
Cincinnati OH 45243

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
MM / DD / YYYY  
05 / 20 / 2016

**Transaction ID : SA11AI.4118**

Amount of Each Receipt this Period  
2700.00

Memo Item

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

Mailing Address 9075 Cunningham Road

City State Zip Code  
Cincinnati OH 45243

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

Name of Employer Occupation  
Wellington Orthopedics Physician

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
MM / DD / YYYY  
05 / 20 / 2016

**Transaction ID : SA11AI.4108**

Amount of Each Receipt this Period  
2700.00

Memo Item

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

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

7900.00

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

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

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NAME OF COMMITTEE (In Full)  
**Brad Wenstrup Victory Fund**

**A.** Full Name (Last, First, Middle Initial)  
**Al Keirle**

Mailing Address 1135 Catawba Valley Drive

City State Zip Code  
Cincinnati OH 45226

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

Name of Employer Occupation  
Ascendum Director of Sales Operations

Receipt For:  Primary  General  Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
MM / DD / YYYY  
06 / 23 / 2016

**Transaction ID : SA11AI.4139**

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address 5741 Grand Legacy Drive

City State Zip Code  
Maineville OH 45039

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

Name of Employer Occupation  
The Procter & Gamble Co. Chief Legal Officer

Receipt For:  Primary  General  Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 24 / 2016

**Transaction ID : SA11AI.4112**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

Mailing Address 6400 Kincaid Road

City State Zip Code  
Cincinnati OH 45213

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

Name of Employer Occupation  
Keating Muething & Klekamp Attorney

Receipt For:  Primary  General  Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2016

**Transaction ID : SA11AI.4205**

Amount of Each Receipt this Period  
500.00

Memo Item

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 16
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Brad Wenstrup Victory Fund**

**A. David Schmitt**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4600 Mason Montgomery Road

City Mason	State OH	Zip Code 45040
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FEC ID number of contributing federal political committee. **C**

Name of Employer The Armor Group	Occupation Chief Executive Officer
-------------------------------------	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 23 / 2016

**Transaction ID : SA11AI.4168**

Amount of Each Receipt this Period  
500.00

Memo Item

**B. C. Tamara Sullivan**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2888 Linwood Avenue

City Cincinnati	State OH	Zip Code 45208
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FEC ID number of contributing federal political committee. **C**

Name of Employer Sullivan Communications	Occupation Consultant
---	--------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 23 / 2016

**Transaction ID : SA11AI.4174**

Amount of Each Receipt this Period  
250.00

Memo Item

**C. Jennifer Triantafilou**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3247 Bridgeknoll Court

City Cincinnati	State OH	Zip Code 45248
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FEC ID number of contributing federal political committee. **C**

Name of Employer Green Township, OH	Occupation Executive Assistant
--	-----------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016

**Transaction ID : SA11AI.4198**

Amount of Each Receipt this Period  
250.00

Memo Item

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

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

1000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 16
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Brad Wenstrup Victory Fund**

**A.** Full Name (Last, First, Middle Initial)  
**Nicholas J. Vehr**

Mailing Address 700 Walnut Street  
Suite 450

City State Zip Code  
Cincinnati OH 45202

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

Name of Employer Occupation  
Vehr Communications Professional Service

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 16 / 2016

**Transaction ID : SA11AI.4135**

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address 106 Pheasantlake Drive

City State Zip Code  
Loveland OH 45140

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

Name of Employer Occupation  
TW Advisors Principal

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 25 / 2016

**Transaction ID : SA11AI.4125**

Amount of Each Receipt this Period  
1000.00

Memo Item

**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)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

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

1250.00

13150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 16			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Brad Wenstrup Victory Fund**

Full Name (Last, First, Middle Initial) <b>A. Anedot</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2016		
Mailing Address PO Box 85431			Amount of Each Disbursement this Period 301.12		
City Baton Rouge	State LA	Zip Code 70884	Memo Item <input type="checkbox"/>		
Purpose of Disbursement E-Merchant Fees		Category/ Type 001	Transaction ID : <b>SB17.4128</b>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Anedot</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2016		
Mailing Address PO Box 85431			Amount of Each Disbursement this Period 11.55		
City Baton Rouge	State LA	Zip Code 70884	Memo Item <input type="checkbox"/>		
Purpose of Disbursement E-Merchant Fees		Category/ Type 001	Transaction ID : <b>SB17.4133</b>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Anedot</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2016		
Mailing Address PO Box 85431			Amount of Each Disbursement this Period 34.35		
City Baton Rouge	State LA	Zip Code 70884	Memo Item <input type="checkbox"/>		
Purpose of Disbursement E-Merchant Fees		Category/ Type 001	Transaction ID : <b>SB17.4136</b>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	347.02
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 16			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Brad Wenstrup Victory Fund**

Full Name (Last, First, Middle Initial) <b>A. Anedot</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2016
Mailing Address PO Box 85431		Amount of Each Disbursement this Period 9.30
City Baton Rouge	State LA	
Purpose of Disbursement E-Merchant Fees		<input type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.4143</b>
State: District:	Category/ Type 001	

Full Name (Last, First, Middle Initial) <b>B. Anedot</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2016
Mailing Address PO Box 85431		Amount of Each Disbursement this Period 11.55
City Baton Rouge	State LA	
Purpose of Disbursement E-Merchant Fees		<input type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.4144</b>
State: District:	Category/ Type 001	

Full Name (Last, First, Middle Initial) <b>C. Anedot</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2016
Mailing Address PO Box 85431		Amount of Each Disbursement this Period 34.35
City Baton Rouge	State LA	
Purpose of Disbursement E-Merchant Fees		<input type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.4189</b>
State: District:	Category/ Type 001	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	55.20
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 16	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Brad Wenstrup Victory Fund**

Full Name (Last, First, Middle Initial) <b>A. Beth O'Leary Catering</b>			Date of Disbursement MM / DD / YYYY 06 / 28 / 2016	
Mailing Address 3438 Church Street			Amount of Each Disbursement this Period 320.00	
City Cincinnati	State OH	Zip Code 45244	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.4162</b>	
Purpose of Disbursement Catering		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>B. Beth O'Leary Catering</b>			Date of Disbursement MM / DD / YYYY 06 / 29 / 2016	
Mailing Address 3438 Church Street			Amount of Each Disbursement this Period 708.40	
City Cincinnati	State OH	Zip Code 45244	<input type="checkbox"/> Memo Item <b>Transaction ID : SB17.4186</b>	
Purpose of Disbursement Catering		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>c. Cookies By Design</b>			Date of Disbursement MM / DD / YYYY 06 / 28 / 2016	
Mailing Address 9405 Kenwood Road			Amount of Each Disbursement this Period 87.25	
City Cincinnati	State OH	Zip Code 45242	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.4155</b>	
Purpose of Disbursement Food		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	708.40
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 16	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Brad Wenstrup Victory Fund**

Full Name (Last, First, Middle Initial) <b>A. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2016
Mailing Address PO Box 30844		Amount of Each Disbursement this Period 750.00
City Bethesda	State MD	
Purpose of Disbursement Compliance Consulting	Zip Code 20824	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	
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)	<b>Transaction ID : SB17.4190</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. First Call Bartending &amp; Catering, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2016
Mailing Address 1636 Jonathan Avenue		Amount of Each Disbursement this Period 1145.00
City Cincinnati	State OH	
Purpose of Disbursement Beverages	Zip Code 45207	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 003	
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)	<b>Transaction ID : SB17.4187</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Michael's</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2016
Mailing Address 3862 Paxton Road		Amount of Each Disbursement this Period 32.09
City Cincinnati	State OH	
Purpose of Disbursement Gifts & Mementos	Zip Code 45209	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type 006	
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)	<b>Transaction ID : SB17.4157</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1895.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 16			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 20d	<input type="checkbox"/> 19c 21

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NAME OF COMMITTEE (In Full)  
**Brad Wenstrup Victory Fund**

Full Name (Last, First, Middle Initial) <b>A. Peerless Printing</b>		Date of Disbursement MM / DD / YYYY 06 / 29 / 2016
Mailing Address 2250 Gilbert Avenue		Amount of Each Disbursement this Period 2761.72
City Cincinnati	State OH Zip Code 45206	
Purpose of Disbursement Printing	Category/Type 003	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : SB17.4188</b>
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Robin Wood Flowers</b>		Date of Disbursement MM / DD / YYYY 06 / 28 / 2016
Mailing Address 1902 Dana Avenue		Amount of Each Disbursement this Period 117.70
City Cincinnati	State OH Zip Code 45207	
Purpose of Disbursement Event Decorations	Category/Type 003	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : SB17.4158</b>
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>C. St. Xavier Bookstore</b>		Date of Disbursement MM / DD / YYYY 06 / 28 / 2016
Mailing Address 600 West North Bend Road		Amount of Each Disbursement this Period 23.43
City Cincinnati	State OH Zip Code 45224	
Purpose of Disbursement Gifts & Mementos	Category/Type 006	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : SB17.4160</b>
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2761.72
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 16			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Brad Wenstrup Victory Fund**

Full Name (Last, First, Middle Initial) <b>A. United States Postal Service</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2016
Mailing Address 3874 Paxton Avenue			Amount of Each Disbursement this Period 946.12
City Cincinnati	State OH	Zip Code 45209	
Purpose of Disbursement Postage		Category/ Type 003	<input checked="" type="checkbox"/> Memo Item
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)		<b>Transaction ID : SB17.4156</b>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Walgreens</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2016
Mailing Address 3822 Paxton Avenue			Amount of Each Disbursement this Period 11.76
City Cincinnati	State OH	Zip Code 45209	
Purpose of Disbursement Printing		Category/ Type 001	<input checked="" type="checkbox"/> Memo Item
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)		<b>Transaction ID : SB17.4159</b>
State: District:			

Full Name (Last, First, Middle Initial) <b>c. Maggie Wuellner</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2016
Mailing Address 3422 Custer Avenue			Amount of Each Disbursement this Period 1538.35
City Cincinnati	State OH	Zip Code 45208	
Purpose of Disbursement SEE MEMO ITEMS		Category/ Type 001	<input type="checkbox"/> Memo Item
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)		<b>Transaction ID : SB17.4154</b>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1538.35
<b>TOTAL</b> This Period (last page this line number only).....	7305.69

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 16
	<input type="checkbox"/> 17 20a <input checked="" type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Brad Wenstrup Victory Fund**

Full Name (Last, First, Middle Initial) <b>A. Building and Restoring the American Dream Fund</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2016
Mailing Address PO Box 30844		Amount of Each Disbursement this Period 997.57
City Bethesda	State MD	
Zip Code 20824	Purpose of Disbursement Transfer of Net Proceeds	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 008	<b>Transaction ID : SB18.4192</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Wenstrup for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2016
Mailing Address PO Box 9551		Amount of Each Disbursement this Period 1111.18
City Cincinnati	State OH	
Zip Code 45209	Purpose of Disbursement Transfer of Net Proceeds	<input type="checkbox"/> Memo Item
Candidate Name <b>Brad Wenstrup</b>	Category/ Type 008	<b>Transaction ID : SB18.4191</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OH District: 02		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2108.75
<b>TOTAL</b> This Period (last page this line number only).....	2108.75