

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

Jim Slone 4 Congress Committee

ADDRESS (number and street)

42075 Oberlin Elyria Road

Check if different than previously reported. (ACC)

Elyria

OH

44035

2. FEC IDENTIFICATION NUMBER ▼

C C00510321

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

OH

04

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 / 11

D D / 06

Y Y Y Y / 2012

in the State of

OH

5. Covering Period

M M / 10

D D / 19

Y Y Y Y / 2012

through

M M / 11

D D / 26

Y Y Y Y / 2012

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 Argena Patouhas

Signature of Treasurer Argena Patouhas

[Electronically Filed]

Date

M M / 12

D D / 06

Y Y Y Y / 2012

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Jim Slone 4 Congress Committee

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 19 / 2012 To: M M / D D / Y Y Y Y 11 / 26 / 2012

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	4335.00	27835.70
(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)).....	4335.00	27835.70
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	3526.13	26264.68
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	119.44
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	3526.13	26145.24
8. Cash on Hand at Close of Reporting Period (from Line 27).....	4804.40	
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	

For further information contact:

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

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

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

Jim Slone 4 Congress Committee

Report Covering the Period: From: 10 / 19 / 2012 To: 11 / 26 / 2012

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of 11 / 06 / 2012 (date of general election)	COLUMN C Total for 11 / 07 / 2012 (date after general election)
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
375.00	5590.00	0.00
(ii) Unitemized		
110.00	9761.10	10.00
(iii) Total of contributions from individuals		
485.00	15351.10	10.00
(b) Political Party Committees		
3000.00	600.00	3000.00
(c) Other Political Committees		
850.00	11884.60	0.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
4335.00	27835.70	3010.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
0.00	119.44	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
9.60	246.42	9.60
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
4344.60	28201.56	3019.60

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 5 / 11

Write or Type Committee Name

Jim Slone 4 Congress Committee

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

II. DISBURSEMENTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OPERATING EXPENDITURES		
3526.13	26264.68	0.00
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) Of All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
0.00	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
0.00	0.00	0.00
(b) Political Party Committees		
0.00	0.00	0.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 11

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
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(c) Other Political Committees (such as PACs)

0.00	0.00	0.00
------	------	------

(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

0.00	0.00	0.00
------	------	------

21. OTHER DISBURSEMENTS

0.00	152.08	0.00
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22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)

3526.13	26416.76	0.00
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III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

4335.00	27835.70	3010.00
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IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

3526.13	26145.24	0.00
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V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	3985.93
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	4344.60
25. SUBTOTAL (add Line 23 and Line 24).....	8330.53
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	3526.13
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	4804.40

**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 11
	<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	

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)
Jim Slone 4 Congress Committee

A. Full Name (Last, First, Middle Initial)
Carl F Hughes

Mailing Address 1640 Dublin Road

City Marion State OH Zip Code 43302

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

Name of Employer Fahey Bank Occupation Executive

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 25 / 2012

Transaction ID : SA11AI.4933

Amount of Each Receipt this Period
 Contribution 250.00

B. Full Name (Last, First, Middle Initial)
Brenda Meschke

Mailing Address 125 Driftwood Court

City Elyria State OH Zip Code 44035

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

Name of Employer n/a Occupation retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
281.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 25 / 2012

Transaction ID : SA11AI.4932

Amount of Each Receipt this Period
 Contribution 125.00

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

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

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

375.00

375.00

**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 11
	<input type="checkbox"/> 11a 12 <input checked="" 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)
Jim Slone 4 Congress Committee

A. Full Name (Last, First, Middle Initial)
America Works PAC

Mailing Address P O Box 7617

City Washington State DC Zip Code 20013

FEC ID number of contributing federal political committee. **C C00331694**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 14 / 2012

Transaction ID : SA11B.4945

Amount of Each Receipt this Period
 Contribution 1000.00

B. Full Name (Last, First, Middle Initial)
Ohio Democratic Party

Mailing Address 340 Fulton St

City Columbus State OH Zip Code 43215

FEC ID number of contributing federal political committee. **C C00016899**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 13 / 2012

Transaction ID : SA11B.4940

Amount of Each Receipt this Period
 Contribution 2000.00

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
 Contribution

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

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

3000.00

3000.00

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

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NAME OF COMMITTEE (In Full)
Jim Slone 4 Congress Committee

A. Full Name (Last, First, Middle Initial)
Allen County Democratic Party

Mailing Address 2331 W Market St

City State Zip Code
Lima OH 45805

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 19 / 2012

Transaction ID : SA11C.4923

Amount of Each Receipt this Period
Contribution 500.00

B. Full Name (Last, First, Middle Initial)
Amherst Democrat Organization - Kenneth Kelleher

Mailing Address 46630 Middle Ridge Road

City State Zip Code
Amherst OH 44001

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
175.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 25 / 2012

Transaction ID : SA11C.4931

Amount of Each Receipt this Period
Contribution 100.00

C. Full Name (Last, First, Middle Initial)
Friends of Amherst-Glenn Loughrie Treasurer

Mailing Address 47567 Middle Ridge Road

City State Zip Code
Amherst OH 44001

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 24 / 2012

Transaction ID : SA11C.4930

Amount of Each Receipt this Period
Contribution 250.00

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

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

850.00

850.00

**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 11			
	<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)
Jim Slone 4 Congress Committee

Full Name (Last, First, Middle Initial) A. Creative Packaging Concepts		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2012
Mailing Address 214 Brace Ave		Amount of Each Disbursement this Period 53.17 Transaction ID : SB17.4948
City Elyria State OH Zip Code 44035	Purpose of Disbursement 23750 - poly newspaper bags 004 Category/Type	
Candidate Name Jim Slone 4 Congress Committee		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OH District: 04		

Full Name (Last, First, Middle Initial) B. Time Warner Cable		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2012
Mailing Address 13195 Collection Center Drive		Amount of Each Disbursement this Period 1396.92 Transaction ID : SB17.4949
City Chicago State IL Zip Code 60693	Purpose of Disbursement Television Ads 004 Category/Type	
Candidate Name Jim Slone 4 Congress Committee		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OH District: 04		

Full Name (Last, First, Middle Initial) c. Time Warner Cable		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2012
Mailing Address 13195 Collection Center Drive		Amount of Each Disbursement this Period 1200.00 Transaction ID : SB17.4951
City Chicago State IL Zip Code 60693	Purpose of Disbursement Television Ads 004 Category/Type	
Candidate Name Jim Slone 4 Congress Committee		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OH District: 04		

SUBTOTAL of Disbursements This Page (optional).....	2650.09
TOTAL 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 11			
	<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)
Jim Slone 4 Congress Committee

Full Name (Last, First, Middle Initial) A. Time Warner Cable		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address 13195 Collection Center Drive		Amount of Each Disbursement this Period 704.91 Transaction ID : SB17.4952
City Chicago State IL Zip Code 60693	Purpose of Disbursement Television Ads 004 Category/Type	
Candidate Name Jim Slone 4 Congress Committee	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OH District: 04		

Full Name (Last, First, Middle Initial) 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 Category/Type	
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) C.		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 Category/Type	
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).....	704.91
TOTAL This Period (last page this line number only).....	3355.00