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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

FEC HAIL CENTER

04 S 109 81 MU 2005

TYPE OR PRINT ▼ Example: If typing, type NAME OF 12FE4M5 COMMITTEE (in full) over the lines. Local 185 Federal PA ADDRESS (number and street) Check if different than previously 10/11 reported. (ACĆ) CITY A STATE A ZIP CODE A FEC IDENTIFICATION NUMBER ▼ IS THIS NEW **AMENDED** OR **REPORT** (N) (A) TYPE OF REPORT Nov 20 (M11) (b) Monthly Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) (Choose One) Report Due On: Dec 20 (M12) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (Non-Election Year Only) (a) Quarterly Reports: Apr 20 (M4) Jan 31 (YE) Jul 20 (M7) Oct 20 (M10) April 15 Quarterly Report (Q1) (c) Runoff (12R) 12-Day Primary (12P) General (12G) July 15 **PRE-Election** Quarterly Report (Q2) Report for the: Convention (12C) Special (12S) October 15 Quarterly Report (Q3) in the January 31 Election on State of Year-End Report (YE) July 31 Mid-Year 30-Day Report (Non-election **POST-Election** General (30G) Runoff (30R) Special (30S) Year Only) (MY) Report for the: Termination Report in the (TER) Election on State of Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. TIMOTHY Type or Print Name of Treasurer Signature of Treasurer Date 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 **FEC FORM 3X** Use Rev. 12/2004 Only

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Federal PAC Report Covering the Period: From: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand January 1, (b) Cash on Hand at Beginning of Reporting Period..... (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) Total Disbursements (from Line 31)...... Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)

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

Federal Election Commission

For further information contact:

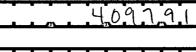
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Toll Free 800-424-9530 ___ Local 202-694-1100

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DETAILED SUMMARY PAGE of Receipts FEC Form 3X (Rev. 06/2004) Page 3 Write or Type Committee Name Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)..... (ii) Unitemized (iii) TOTAL (add Lines 11(a)(i) and (ii).....▶ (b) Political Party Committees (c) Other Political Committees (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)▶ 12. Transfers From Affiliated/Other Party Committees..... 13. All Loans Received 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... 17. Other Federal Receipts (Dividends, Interest, etc.)..... 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3) (b) Levin Funds (from Schedule H5) (c) Total Transfers (add 18(a) and 18(b)).. 19. Total Receipts (add Lines 11(d), 409791 12, 13, 14, 15, 16, 17, and 18(c))....... ▶

20. Total Federal Receipts (subtract Line 18(c) from Line 19)▶



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DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4 **COLUMN A COLUMN B** II. Disbursements **Total This Period** Calendar Year-to-Date 21. Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4) (i) Federal Share (ii) Non-Federal Share..... (b) Other Federal Operating Expenditures (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶ 22. Transfers to Affiliated/Other Party Contributions to Federal Candidates/Committees and Other Political Committees..... Independent Expenditures 26. Loan Repayments Made..... Loans Made......Refunds of Contributions To:

(a) Individuals/Persons Other
Than Political Committees...... (b) Political Party Committees (c) Other Political Committees (such as PACs)..... (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..........▶ 00 00 29. Other Disbursements 30. Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity (from Schedule H6) (i) Federal Share (ii) "Levin" Share..... (b) Federal Election Activity Paid Entirely With Federal Funds (c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b)).... ▶ 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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III. N	et Contributions/Operating Ex- penditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
(fro	tal Contributions (other than loans) om Line 11(d), page 3)	409791	409791
(fro	tal Contribution Refunds om Line 28(d))	000	000
	et Contributions (other than loans) ubtract Line 34 from Line 33)	409791	409791
	tal Federal Operating Expenditures dd Line 21(a)(i) and Line 21(b))	0.00	000
	fsets to Operating Expenditures om Line 15, page 3)	000	000
	et Operating Expenditures ubtract Line 37 from Line 36)		000

SCHEDULE B (FEC Form 3X)

TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE N (check only 21b 27	
Any information copied from such Reports and Statem or for commercial purposes, other than using the name	nents may not be sold or used	by any perso	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Bollemakes Local			
Full Name (Last, First, Middle Initial) A. Laptur & Cong Mailing Address	ress		Date of Disbursement
State: OH District:		Category/ Type	Amount of Each Disbursement this Period
B. True Dem Clauss Mailing Address Box 442	hip Connit	tee	Date of Disbursement
Purpose of Disbursement Candidate Name Office Sought: House Disbursem Senate	· · · · · · · · · · · · · · · · · · ·	Category/ Type	Amount of Each Disbursement this Period
Full Name (Last, First, Middle Initial) C. Mailing Address			Date of Disbursement
City S Purpose of Disbursement	State Zip Code		Amount of Each Disbursement this Period
		Category/ Type	
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)			9,750,00

SCHEDULE B (FEC Form 3X)

TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE N (check only of				
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) Boilemaker Lo		·				
Full Name (Last, First, Middle Initial) A. Devoca Mailing Address 1020 G.Nassel	atic Club		Date of Disbursement			
Purpose of Disbursement Candidate Name Office Sought: House Senate President State: OH District:	aiser	Category/ Type	Amount of Each Disbursement this Period			
Full Name (Last, First, Middle Initial) 3. Cuty Con Scott Mailing Address 2400 Detroit Owe	Nooran Opt 12		Date of Disbursement			
Purpose of Disbursement Scott Nooraw, G Candidate Name Maumel, OH City Cource Office Sought: House Disbursen	lainer l	Category/ Type	Amount of Each Disbursement this Period			
Full Name (Last, First, Middle Initial) Mailing Address			Date of Disbursement			
City Purpose of Disbursement Candidate Name	State Zip Code		Amount of Each Disbursement this Period			
Office Sought: House Disburser Senate President State: District:	nent For: Primary General Other (specify)	Category/ Type				
SUBTOTAL of Disbursements This Page (optional)						
TOTAL This Period (last page this line number only)			40000			

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PREPARER (2/2015)	DATE PREPARED			
(3/2015)	•			