

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

RECEIVED
Office Use Only

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

12 FEB 2012 APR 27 AM 8:32
FEC MAIL CENTER

CITIZENS WITH TOM GUARIENTE

ADDRESS (number and street) 119885 DETROIT ROAD

Check if different than previously reported. (ACC)

ROCKY RIVER OH 44116-1

2. FEC IDENTIFICATION NUMBER ▼

C00499483

CITY ▲ STATE ▲ ZIP CODE ▲
STATE ▼ DISTRICT
3. IS THIS REPORT NEW (N) OR AMENDED (A)
OH 10

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

01' 01' 2012 through 03' 31' 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

Anne Hawkins

Signature of Treasurer

Anne Hawkins

Date

04' 10' 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)

12030794313

Write or Type Committee Name

Citizens With Tom Guarente

Report Covering the Period:

From:

01 01 2012

To:

03 31 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))....	24,745.00	24,745.00
(b) Total Contribution Refunds (from Line 20(d))	2,500.00	13,475.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	22,245.00	11,270.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	5,848.60	5,848.60
(b) Total Offsets to Operating Expenditures (from Line 14)	13.90	13.90
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	5,834.70	5,834.70
8. Cash on Hand at Close of Reporting Period (from Line 27)	4,435.30	
9. 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)		

For further information contact:

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

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

12030794314

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

Citizens With Tom Guarente

Report Covering the Period: From: 01/01/2012 To: 03/31/2012

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A).....

(ii) Unitemized.....

(iii) TOTAL of contributions
from individuals ▶

(b) Political Party Committees.....

(c) Other Political Committees
(such as PACs).....

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))..

Table with 3 columns for itemized/unitemized contributions and totals.

Table with 3 columns for itemized/unitemized contributions and totals, with handwritten values: 19,200.00, 545.00, 19,745.00.

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES.....

13. LOANS:

(a) Made or Guaranteed by the
Candidate.....

(b) All Other Loans.....

(c) TOTAL LOANS
(add Lines 13(a) and (b)).....

14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.).....

15. OTHER RECEIPTS
(Dividends, Interest, etc.).....

16. TOTAL RECEIPTS (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)..... ▶

Table for Line 12: TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

Table for Line 13: LOANS

Table for Line 14: OFFSETS TO OPERATING EXPENDITURES

Table for Line 15: OTHER RECEIPTS

Table for Line 16: TOTAL RECEIPTS (Total: 0.00)

Table for Line 12: TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

Table for Line 13: LOANS

Table for Line 14: OFFSETS TO OPERATING EXPENDITURES (Total: 13.90)

Table for Line 15: OTHER RECEIPTS

Table for Line 16: TOTAL RECEIPTS (Total: 24,758.90)

12030794315

**DETAILED SUMMARY PAGE
of Disbursements**

II. DISBURSEMENTS

**COLUMN A
Total This Period**

**COLUMN B
Election Cycle-to-Date**

17. OPERATING EXPENDITURES.....

163.91

5,848.60

18. TRANSFERS TO OTHER
AUTHORIZED COMMITTEES

19. LOAN REPAYMENTS:

(a) Of Loans Made or Guaranteed
by the Candidate.....

(b) Of All Other Loans.....

(c) TOTAL LOAN REPAYMENTS
(add Lines 19(a) and (b)).....

20. 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 20(a), (b), and (c)).....

2500.00

13,475.00

2500.00

13,475.00

21. OTHER DISBURSEMENTS.....

500.00

1,000.00

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

3,163.91

20,323.60

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

7,599.21

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....

0.00

25. SUBTOTAL (add Line 23 and Line 24).....

7,599.21

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

3,163.91

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD
(subtract Line 26 from Line 25).....

4,435.30

12030794316

**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	OF
	<input 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) Citizens + With Tom Guarente

A.

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 MM / DD / YYYY

Amount of Each Receipt this Period \$

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) _____

Election Cycle-to-Date _____

Date of Receipt MM / DD / YYYY

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) _____

Election Cycle-to-Date _____

Date of Receipt MM / DD / YYYY

Amount of Each Receipt this Period \$

SUBTOTAL of Receipts This Page (optional)..... 0.00

TOTAL This Period (last page this line number only)..... 0.00

12030794317

**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 1 OF 1	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
Citizens with Tom Guarente

Full Name (Last, First, Middle Initial) A. Impact Marketing Group		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2012
Mailing Address 20180 Center Ridge Rd		Amount of Each Disbursement this Period 123.91
City Rocky River OH	State Zip Code OH 44116	
Purpose of Disbursement Campaign Banner	Candidate Name Thomas A Guarente	Category/ Type 006
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OH District: 10		

Full Name (Last, First, Middle Initial) B. Huntington National Bank		Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2012
Mailing Address PO Box 1558 EA 1 W37		Amount of Each Disbursement this Period 20.00
City Columbus OH	State Zip Code OH 43216-1558	
Purpose of Disbursement Bank Service charge	Candidate Name Thomas A Guarente	Category/ Type 001
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OH District: 10		

Full Name (Last, First, Middle Initial) C. Huntington National Bank		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2012
Mailing Address PO Box 1558 EA 1 W37		Amount of Each Disbursement this Period 20.00
City Columbus OH	State Zip Code OH 43216-1558	
Purpose of Disbursement Bank Service Charge	Candidate Name Thomas A Guarente	Category/ Type 001
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OH District: 10		

SUBTOTAL of Disbursements This Page (optional)..... **163.91**

TOTAL This Period (last page this line number only)..... **163.91**

12030794318

**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 | OF |

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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)

Citizens With Tom Guarente

Full Name (Last, First, Middle Initial)

A.

Carl Swart

Mailing Address

P.O. Box 42591

City

Cincinnati

State

OH

Zip Code

45242

Purpose of Disbursement

Refund of 7-30-2011 contribution

Candidate Name

Thomas A. Guarente

Category/
Type

0-10

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: OH

District: 10

Full Name (Last, First, Middle Initial)

Date of Disbursement

03 / 31 / 2012

Amount of Each Disbursement this Period

2,500.00

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State:

District:

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).....

2,500.00

2,500.00

12030794319

**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	OF
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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)
Citizens With Tom Guarente

A.

Full Name (Last, First, Middle Initial)
Krauss 4 Congress

Mailing Address
P.O. Box 2649

City
Sandusky State
OH Zip Code
44871

Purpose of Disbursement
Campaign Contribution

Candidate Name
Steve Krauss

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: **OH** District: **9**

Date of Disbursement
M M / D D / Y Y Y Y
01 / 13 / 2012

Amount of Each Disbursement this Period
,500.00

Category/
Type
011

B.

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 / D D / Y Y Y Y

Amount of Each Disbursement this Period

Category/
Type

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 / D D / Y Y Y Y

Amount of Each Disbursement this Period

Category/
Type

SUBTOTAL of Disbursements This Page (optional)..... **,500.00**

TOTAL This Period (last page this line number only)..... **,500.00**

12030794320

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked
4/21/12

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked



PREPARER

(3/2005)

4/27/12

DATE PREPARED

12030794321