

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

LaTourette for Congress

ADDRESS (number and street)

320 Kenarden Drive

Check if different than previously reported. (ACC)

Highland Hts

OH

44143-3710

2. FEC IDENTIFICATION NUMBER ▼

C C00284174

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

OH

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

through

M M /

D D /

Y Y Y Y

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 Scott Coleman

Signature of Treasurer Scott Coleman

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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
LaTourette for Congress

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

	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))....	0	0
(b) Total Contribution Refunds (from Line 20(d))	0	2500
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	0	-2500
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	71926.72	121654.53
(b) Total Offsets to Operating Expenditures (from Line 14).....	0	0
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	71926.72	121654.53
8. Cash on Hand at Close of Reporting Period (from Line 27).....	392532.19	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0	

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

LaTourette for Congress

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

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).....	0	422330
(ii) Unitemized.....	0	-422330
(iii) TOTAL of contributions from individuals ▶	0	0
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) The Candidate.....	0	0
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0	0
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
	0	0
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0	0
(b) All Other Loans.....	0	0
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0	0
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		
	0	0
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	0	0
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	0	0

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	71926.72	121654.53
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	0
(b) Of All Other Loans	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	2500
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0	2500
21. OTHER DISBURSEMENTS	0	0
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	71926.72	124154.53

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	464458.91
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	0
25. SUBTOTAL (add Line 23 and Line 24).....	464458.91
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	71926.72
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	392532.19

**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 5 OF 13	
	<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)
LaTourette for Congress

Full Name (Last, First, Middle Initial) A. Aristotle Publishing		Date of Disbursement MM / DD / YYYY 01 / 13 / 2013
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 700 Transaction ID : B-E-50848
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement Administrative/Salary/Overhead: Software Category/Type 001	
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. Extra Space Storage		Date of Disbursement MM / DD / YYYY 01 / 13 / 2013
Mailing Address 7379 Mentor Avenue		Amount of Each Disbursement this Period 181.48 Transaction ID : B-E-50849
City Mentor State OH Zip Code 44060-7523	Purpose of Disbursement Administrative/Salary/Overhead: Storage Category/Type 001	
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. Verizon Wireless		Date of Disbursement MM / DD / YYYY 01 / 13 / 2013
Mailing Address 5945 Mayfield Road		Amount of Each Disbursement this Period 74.32 Transaction ID : B-E-50846
City Cleveland State OH Zip Code 44124-2902	Purpose of Disbursement Cellphone Category/Type 001	
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).....	955.80
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 6 OF 13			
	<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)
LaTourette for Congress

Full Name (Last, First, Middle Initial) A. Uhaul		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2013
Mailing Address 1200 W Broad Street		Amount of Each Disbursement this Period 260.08 Transaction ID : B-E-50879
City Falls Church	State VA Zip Code 22046-2116	
Purpose of Disbursement Truck for Hurricane Relief	Category/Type 001	
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. Keybank		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2013
Mailing Address 8 N State Street		Amount of Each Disbursement this Period 43.6 Transaction ID : B-E-50880
City Painesville	State OH Zip Code 44077-3955	
Purpose of Disbursement Bank Fees	Category/Type 001	
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. Scott Coleman		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2013
Mailing Address 320 Kenarden Drive		Amount of Each Disbursement this Period 500 Transaction ID : B-E-50851
City Highland Hts	State OH Zip Code 44143-3710	
Purpose of Disbursement Administrative/Salary/Overhead: Payroll	Category/Type 001	
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).....	803.68
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 7 OF 13			
	<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)
LaTourette for Congress

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Date of Disbursement MM / DD / YYYY 02 / 07 / 2013
Mailing Address 5945 Mayfield Road		Amount of Each Disbursement this Period 94.86 Transaction ID : B-E-50852
City Cleveland State OH Zip Code 44124-2902	Purpose of Disbursement Cellphone 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)	
State: District:		

Full Name (Last, First, Middle Initial) B. Aristotle Publishing		Date of Disbursement MM / DD / YYYY 02 / 13 / 2013
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 700 Transaction ID : B-E-50855
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement Administrative/Salary/Overhead: Software 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)	
State: District:		

Full Name (Last, First, Middle Initial) c. Extra Space Storage		Date of Disbursement MM / DD / YYYY 02 / 13 / 2013
Mailing Address 7379 Mentor Avenue		Amount of Each Disbursement this Period 181.48 Transaction ID : B-E-50856
City Mentor State OH Zip Code 44060-7523	Purpose of Disbursement Administrative/Salary/Overhead: Storage 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)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	976.34
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 8 OF 13			
	<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)
LaTourette for Congress

Full Name (Last, First, Middle Initial) A. Hiram College		Date of Disbursement MM / DD / YYYY 02 / 13 / 2013
Mailing Address 11730 Ohio 700		Amount of Each Disbursement this Period 50000 Transaction ID : B-E-50854
City Hiram	State OH	
Zip Code 44234	Purpose of Disbursement Other: Archives Project Contribution	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) B. Republican Main Street PAC		Date of Disbursement MM / DD / YYYY 02 / 13 / 2013
Mailing Address 1220 L Street NW		Amount of Each Disbursement this Period 5000 Transaction ID : B-E-50853
City Washington	State DC	
Zip Code 20005-4018	Purpose of Disbursement Membership	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. Wickliffe Floral Co		Date of Disbursement MM / DD / YYYY 02 / 13 / 2013
Mailing Address 29609 Euclid Avenue		Amount of Each Disbursement this Period 86.06 Transaction ID : B-E-50858
City Wickliffe	State OH	
Zip Code 44092-1828	Purpose of Disbursement Administrative/Salary/Overhead: Sympathy	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).....	55086.06
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 9 OF 13
	<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)
LaTourette for Congress

Full Name (Last, First, Middle Initial) A. Adoption Network		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2013
Mailing Address 4614 Prospect Avenue		Amount of Each Disbursement this Period 500 Transaction ID : B-E-50860
City Cleveland	State OH Zip Code 44103-4394	
Purpose of Disbursement Event Contribution	Category/Type 001	
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. Keybank		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2013
Mailing Address 8 N State Street		Amount of Each Disbursement this Period 207.1 Transaction ID : B-E-50861
City Painesville	State OH Zip Code 44077-3955	
Purpose of Disbursement Administrative/Salary/Overhead: Taxes	Category/Type 001	
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. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2013
Mailing Address 5945 Mayfield Road		Amount of Each Disbursement this Period 97.25 Transaction ID : B-E-50862
City Cleveland	State OH Zip Code 44124-2902	
Purpose of Disbursement Cellphone	Category/Type 001	
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).....	804.35
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 10 OF 13			
	<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)
LaTourette for Congress

Full Name (Last, First, Middle Initial) A. Chris Gibson For Congress		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2013
Mailing Address PO Box 234		Amount of Each Disbursement this Period 2500 Transaction ID : B-E-50869
City Saratoga Springs	State NY	
Zip Code 12866-0234	Purpose of Disbursement Other: Contribution	Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. Michael Grimm For Congress		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2013
Mailing Address PO Box 61806		Amount of Each Disbursement this Period 2500 Transaction ID : B-E-50865
City Staten Island	State NY	
Zip Code 10306-7806	Purpose of Disbursement Other: Contribution	Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) c. Friends Of Dave Joyce		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2013
Mailing Address 320 Kenarden Drive		Amount of Each Disbursement this Period 1000 Transaction ID : B-E-50868
City Highland Heights	State OH	
Zip Code 44143-3710	Purpose of Disbursement Other: Contribution	Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	6000.00
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 13			
	<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)
LaTourette for Congress

Full Name (Last, First, Middle Initial) A. Collins For Senator		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2013
Mailing Address PO Box 1096		Amount of Each Disbursement this Period 1000 Transaction ID : B-E-50867
City Bangor	State ME	
Zip Code 04402-1096	Purpose of Disbursement Other: Contribution	Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. Aristotle Publishing		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2013
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 700 Transaction ID : B-E-50872
City Washington	State DC	
Zip Code 20003-1164	Purpose of Disbursement Administrative/Salary/Overhead: Software	Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) c. Extra Space Storage		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2013
Mailing Address 7379 Mentor Avenue		Amount of Each Disbursement this Period 181.48 Transaction ID : B-E-50873
City Mentor	State OH	
Zip Code 44060-7523	Purpose of Disbursement Administrative/Salary/Overhead: Storage	Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1881.48
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 12 OF 13		
	<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)
LaTourette for Congress

Full Name (Last, First, Middle Initial) A. The Ohio State		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2013
Mailing Address University 410 Woody Hayes Ave		Amount of Each Disbursement this Period 1573 Transaction ID : B-E-50874
City Columbus	State OH Zip Code 43210	
Purpose of Disbursement Administrative/Salary/Overhead: Tickets	Category/Type 001	
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. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2013
Mailing Address 5945 Mayfield Road		Amount of Each Disbursement this Period 210.09 Transaction ID : B-E-50871
City Cleveland	State OH Zip Code 44124-2902	
Purpose of Disbursement Cellphone	Category/Type 001	
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. Pioneer PAC		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2013
Mailing Address 412 First St. SE #100		Amount of Each Disbursement this Period 2500 Transaction ID : B-E-50866
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Other: Contribution	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).....	4283.09
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 13 OF 13	
	<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)
LaTourette for Congress

Full Name (Last, First, Middle Initial) A. Keybank		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2013
Mailing Address 8 N State Street		Amount of Each Disbursement this Period 13.12 Transaction ID : B-E-50881
City Painesville State OH Zip Code 44077-3955	Purpose of Disbursement Bank Charges <input type="text" value="001"/> 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) 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="text"/> 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 <input type="text"/> 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).....	13.12
TOTAL This Period (last page this line number only).....	70803.92