Image# 14960627346				04/09/2014 14 : 06
			I .	PAGE 1 / 4
FEC	STATEMEN	NT OF		I
FORM 1	ORGANIZ	ATION		
				Office Use Only
1. NAME OF COMMITTEE (in full)	× (Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Ohioans United	Action Fund			1
	75 W Third Ave			
ADDRESS (number and street)				
(Check if address is changed)				
	Columbus		OH   43	3201
	CITY A		STATE A	ZIP CODE▲
COMMITTEE'S E-MAIL ADDRE	SS			
(Check if address	PDiBiase@americavote	es.org		
is changed)	Optional Second E-Mail Add	dress		
	charshman@hcands	.com		
COMMITTEE'S WEB PAGE AD	DRESS (URL)			
(Check if address				
is changed)				······································
2. DATE 04 / 05				
3. FEC IDENTIFICATION N	JMBER ► C co	00528869		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined th	nis Statement and to the best	of my knowledge and belief it	is true, correct ar	nd complete.
Type or Print Name of Treasure	r Pete DiBiase			
Signature of Treasurer	DiBiase	[Electronically Filed]	Date 04	/ D D / Y Y Y Y 09 2014
NOTE: Submission of false, erron		may subject the person signing t ON SHOULD BE REPORTED W		e penalties of 2 U.S.C. §437g.
Office Use Only		For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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TYPE OF COMMITTEE	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate info	ormation below.)
(b) This committee is an authorized committee, and is NOT a principal campaign con information below.)	ommittee. (Complete the candidate
Name of Candidate	
Candidate Office Party Affiliation Office Sought: House Senate	State State District
(c) This committee supports/opposes only one candidate, and is NOT an authorized	d committee.
Name of Candidate	
Party Committee:	
(d) This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Part
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization o	on line 6.) Its connected organization is
Corporation Corporation w/o Capital Stock	k Labor Organization
Membership Organization Trade Association	Cooperative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT committee. (i.e., nonconnected committee)	T a separate segregated fund or part
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.	.)
Joint Fundraising Representative:	
(g) This committee collects contributions, pays fundraising expenses and disburses net committees/organizations, at least one of which is an authorized committee of a fed	
(h) This committee collects contributions, pays fundraising expenses and disburses net committees/organizations, none of which is an authorized committee of a federal ca	
Committees Participating in Joint Fundraiser	
1 FEC ID num	ber C
2 FEC ID num	ber C
3 FEC ID num	ber C
4.	ber C

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Write or Type Committee Name

## Ohioans United Action Fund

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address											
	CITY	STATE	ZIP CODE								
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor											

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

James Ma	artin
Full Name	
Mailing Address	225 E. Broad Street
	Columbus     OH     43215       -     -     -     -
Title or Position	CITY STATE ZIP CODE
Custodian	Telephone number 614 228 4526

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer	Pete DiBiase
Mailing Address	75 W 3rd Ave
	Columbus     OH     43201     –     /     /     /     /     /      <
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number 216 970 8196

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Full Name of Designated Agent		I			1							I	I	I													
Mailing Address																											
																				L							
							CI	ΓY									STA	ΤE				ZII	P (	DE			
Title or Position																											
												Tele	eph	ione	e ni	umt	ber										

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of B	ank, Depo	ository, etc.
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Chase	Bank		
Mailing Address	100 E Broad St		
	Columbus		43215
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY	STATE	ZIP CODE