

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 112
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. EKLUND, JOHN, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12040 BURLINGTON GLEN DR

City CHARDON	State OH	Zip Code 44024
-----------------	-------------	-------------------

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

Name of Employer (for Individual) CALFEE, HALTER & GRISWOLD LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		15		2015

Transaction ID : SA11AI.279430

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. FIORE-ZIMMERS, BILLIE, , MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 291 BRYN DU DR

City GRANVILLE	State OH	Zip Code 43023
-------------------	-------------	-------------------

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

Name of Employer (for Individual) BENESCH,FRIEDLANDER ETAL	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		03		2015

Transaction ID : SA11AI.279439

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

C. GERHARDT, CHARLES, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 700 WALNUT ST
STE 450

City CINCINNATI	State OH	Zip Code 45202
--------------------	-------------	-------------------

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

Name of Employer (for Individual) GOVERNMENT STRATEGIES GROUP	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		12		2015

Transaction ID : SA11AI.279452

Amount of Each Receipt this Period
1500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2250.00
TOTAL This Period (last page this line number only).....	