

HUNTER, CARNAHAN, SHOUB, BYARD & HARSHMAN

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www.hcands.com

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS

13 JAN 25 PM 2:01
Of Counsel
Robert M. Cody

January 21, 2013

Federal Election Commission
999 E Street, N.W.
Washington, DC 20463

Re: FEC Form 5 filing for Ohio Organizing Campaign

2013 JAN 29 PM 3:53

FEC
PUBLIC RECORDS

To Whom It May Concern:

Please find enclosed the FEC Form 5 report for the above referenced entity. If possible, please return a file stamped copy to our office in the enclosed envelope.

Sincerely,

Chris Hershner

Enclosures

Cc: Secretary of the Senate, Office of Public Records
Karen Gasper

13031022382

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other Than Political Committees) Including Qualified Nonprofit Corporations

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS
JAN 25 PM 3:03

1. (a) Name of Individual, Organization or Corporation
Ohio Organizing Campaign

(b) Address (number and street) check if different than previously reported
35 E. Gay Suite 210

City, State and ZIP Code
Columbus, OH 43215

3. FEC Identification Number
C

2. Corporate filers only
Is the filer a qualified nonprofit corporation? Yes No

Individual filers only
Name of Employer Occupation

4. TYPE OF REPORT (check appropriate boxes):

- (a) April 15 Quarterly Report
July 15 Quarterly Report
October 15 Quarterly Report
January 31 Year-End Report
- 24-Hour Report
48-Hour Report

b) Is this Report an amendment? Yes No

5. COVERING PERIOD: FROM

10 01 2012
THROUGH
12 31 2012

2013 JAN 29 PM 3:53
FEDERAL ELECTION COMMISSION

6. TOTAL CONTRIBUTIONS 5163.00

7. TOTAL INDEPENDENT EXPENDITURES 5163.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent. In addition, (if the independent expenditures reported herein were made by a corporation) I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM SIGNATURE DATE

Karen Gasper  1.17.13

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.

For further information, contact:
Federal Election Commission, 990 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-604-1100

**SCHEDULE 5-A
ITEMIZED RECEIPTS**

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 FILER (In Full)

Ohio Organizing Campaign

A. Full Name (Last, First, Middle Initial)			Date of Receipt	
Ohio Organizing Campaign				
Mailing Address				
35 E. Gay Sulte 210			10	17 2012
City	State	Zip Code		
Columbus	OH	43215		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period	
C			5163.00	
Name of Employer		Occupation		

B. Full Name (Last, First, Middle Initial)			Date of Receipt	
Mailing Address				
City	State	Zip Code		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period	
C				
Name of Employer		Occupation		

C. Full Name (Last, First, Middle Initial)			Date of Receipt	
Mailing Address				
City	State	Zip Code		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period	
C				
Name of Employer		Occupation		

D. Full Name (Last, First, Middle Initial)			Date of Receipt	
Mailing Address				
City	State	Zip Code		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period	
C				
Name of Employer		Occupation		

SUBTOTAL of Receipts This Page (optional)	▶	5163.00
TOTAL This Period (last page carry total to Line 6)	▶	5163.00

13031022384

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Ohio Organizing Campaign

Full Name (Last, First, Middle Initial) of Payee Ohio Organizing Campaign		Date 10 17 2012
Mailing Address 35 E. Gay St. Suite 210		Amount 1250.00
City Columbus OH 43215	State Zip Code	
Purpose of Expenditure Staff Time	Category/Type	Office Sought: <input type="checkbox"/> House State: <u>OH</u> <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1250.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee OIE Consulting		Date 10 17 2012
Mailing Address P.O. Box 2521		Amount 471.00
City Columbus OH 43201	State Zip Code	
Purpose of Expenditure handout printing	Category/Type	Office Sought: <input type="checkbox"/> House State: <u>OH</u> <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1721.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Ohio Organizing Campaign		Date 10 17 2012
Mailing Address 35 E. Gay St. Suite 210		Amount 1250.00
City Columbus OH 43215	State Zip Code	
Purpose of Expenditure Staff Time	Category/Type	Office Sought: <input type="checkbox"/> House State: <u>OH</u> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Sherrod Brown		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1250.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	:	:	2971.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	:	:	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	▶	:	:	2971.00

13031022385

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Ohio Organizing Campaign

Full Name (Last, First, Middle Initial) of Payee OIE Consulting		Date 10 17 2012
Mailing Address P.O. Box 2521		Amount 471.00
City Columbus OH 43215	State Zip Code	
Purpose of Expenditure handout printing	Category/Type	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Sherrod Brown		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1721.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee OIE Consulting		Date 10 17 2012
Mailing Address P.O. Box 2521		Amount 471.00
City Columbus OH 43201	State Zip Code	
Purpose of Expenditure handout printing	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 16 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Betty Sutton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 471.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Ohio Organizing Campaign		Date 10 17 2012
Mailing Address 35 E. Gay St. Suite 210		Amount 1250.00
City Columbus OH 43215	State Zip Code	
Purpose of Expenditure Staff Time	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 16 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Betty Sutton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1721.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	2192.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	.
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	5163.00

13031022386

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.

13031022387

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked 1/21/13
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	Postmarked
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input checked="" type="checkbox"/> Received from Senate Public Records Office	Date of Receipt 1/25/13
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
 PREPARER	1/29/13 DATE PREPARED