

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
Jim Slone 4 Congress Committee

ADDRESS (number and street) 42075 Oberlin Elyria Road
 Check if different than previously reported. (ACC) Elyria OH 44035

2. **FEC IDENTIFICATION NUMBER** C C00510321 3. IS THIS REPORT NEW (N) **OR** AMENDED (A)
CITY Elyria STATE OH ZIP CODE 44035 STATE OH DISTRICT 04

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 MM / DD / YYYY in the State of OH
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on 11 / 06 / 2012 in the State of OH

5. Covering Period MM / DD / YYYY 10 / 19 / 2012 through MM / DD / YYYY 11 / 26 / 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 Argena Patouhas

Signature of Treasurer Argena Patouhas *[Electronically Filed]* Date MM / DD / YYYY 01 / 30 / 2013

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Jim Slone 4 Congress Committee

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))....	4447.66	31631.26
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	4447.66	31631.26
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	3638.79	27401.19
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	119.44
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	3638.79	27281.75
8. Cash on Hand at Close of Reporting Period (from Line 27).....	4453.45	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	85.00	

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

Jim Slone 4 Congress Committee

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).....	375.00	5673.91
(ii) Unitemized.....	110.00	9721.10
(iii) TOTAL of contributions from individuals ▶	485.00	15395.01
(b) Political Party Committees.....	3000.00	3600.00
(c) Other Political Committees (such as PACs).....	850.00	11983.30
(d) The Candidate.....	112.66	652.95
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	4447.66	31631.26
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	119.44
15. OTHER RECEIPTS (Dividends, Interest, etc.)	9.60	256.02
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	4457.26	32006.72

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	3638.79	27401.19
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	152.08
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	3638.79	27553.27

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	3634.98
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	4457.26
25. SUBTOTAL (add Line 23 and Line 24).....	8092.24
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	3638.79
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	4453.45

**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 5 OF 14
	<input checked="" 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)
Jim Slone 4 Congress Committee

A. Full Name (Last, First, Middle Initial)
Carl F Hughes

Mailing Address 1640 Dublin Road

City Marion State OH Zip Code 43302

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

Name of Employer Fahey Bank Occupation Executive

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 25 / 2012

Transaction ID : SA11AI.4933

Amount of Each Receipt this Period
 Contribution 250.00

B. Full Name (Last, First, Middle Initial)
Brenda Meschke

Mailing Address 125 Driftwood Court

City Elyria State OH Zip Code 44035

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

Name of Employer n/a Occupation retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
281.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 25 / 2012

Transaction ID : SA11AI.4932

Amount of Each Receipt this Period
 Contribution 125.00

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
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

375.00

375.00

**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 6 OF 14	
	<input type="checkbox"/> 11a 12	<input checked="" type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/> 15				

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NAME OF COMMITTEE (In Full)
Jim Slone 4 Congress Committee

A. Full Name (Last, First, Middle Initial)
America Works PAC

Mailing Address P O Box 7617

City Washington State DC Zip Code 20013

FEC ID number of contributing federal political committee. **C** C00331694

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 14 / 2012

Transaction ID : SA11B.4945

Amount of Each Receipt this Period
Contribution 1000.00

B. Full Name (Last, First, Middle Initial)
Ohio Democratic Party

Mailing Address 340 Fulton St

City Columbus State OH Zip Code 43215

FEC ID number of contributing federal political committee. **C** C00016899

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2098.70

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 13 / 2012

Transaction ID : SA11B.4940

Amount of Each Receipt this Period
Contribution 2000.00

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
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period
Contribution

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

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

3000.00

3000.00

**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 7 OF 14
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jim Slone 4 Congress Committee

A. Full Name (Last, First, Middle Initial)
Allen County Democratic Party

Mailing Address 2331 W Market St

City State Zip Code
Lima OH 45805

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 19 / 2012

Transaction ID : SA11C.4923

Amount of Each Receipt this Period

Contribution

B. Full Name (Last, First, Middle Initial)
Amherst Democrat Organization - Kenneth Kelleher

Mailing Address 46630 Middle Ridge Road

City State Zip Code
Amherst OH 44001

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 25 / 2012

Transaction ID : SA11C.4931

Amount of Each Receipt this Period

Contribution

C. Full Name (Last, First, Middle Initial)
Friends of Amherst-Glenn Loughrie Treasurer

Mailing Address 47567 Middle Ridge Road

City State Zip Code
Amherst OH 44001

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 24 / 2012

Transaction ID : SA11C.4930

Amount of Each Receipt this Period

Contribution

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

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

**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 8 OF 14
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jim Slone 4 Congress Committee

A. Full Name (Last, First, Middle Initial)
JAMES M M SLONE

Mailing Address 1504 PARK AVE

City ELYRIA State OH Zip Code 44035

FEC ID number of contributing federal political committee. **C H2OH04131**

Name of Employer n/a Occupation retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
617.54

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 19 / 2012

Transaction ID : SA11D.5098

Amount of Each Receipt this Period
 2.50
 In-kind - turnpike toll - cash

B. Full Name (Last, First, Middle Initial)
JAMES M M SLONE

Mailing Address 1504 PARK AVE

City ELYRIA State OH Zip Code 44035

FEC ID number of contributing federal political committee. **C H2OH04131**

Name of Employer n/a Occupation retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
658.55

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2012

Transaction ID : SA11D.5101

Amount of Each Receipt this Period
 41.01
 In-kind - gasoline purchase

C. Full Name (Last, First, Middle Initial)
JAMES M M SLONE

Mailing Address 1504 PARK AVE

City ELYRIA State OH Zip Code 44035

FEC ID number of contributing federal political committee. **C H2OH04131**

Name of Employer n/a Occupation retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
661.55

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 25 / 2012

Transaction ID : SA11D.5105

Amount of Each Receipt this Period
 3.00
 In-kind - turnpike toll - cash

SUBTOTAL of Receipts This Page (optional).....	46.51
TOTAL This Period (last page this line number only).....	

**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 9 OF 14
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jim Slone 4 Congress Committee

A. Full Name (Last, First, Middle Initial)
JAMES M M SLONE

Mailing Address 1504 PARK AVE

City ELYRIA State OH Zip Code 44035

FEC ID number of contributing federal political committee. **C H2OH04131**

Name of Employer n/a Occupation retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
661.55

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 26 / 2012

Transaction ID : SA11D.5108

Amount of Each Receipt this Period
34.00
 In-kind - gasoline purchase

B. Full Name (Last, First, Middle Initial)
JAMES M M SLONE

Mailing Address 1504 PARK AVE

City ELYRIA State OH Zip Code 44035

FEC ID number of contributing federal political committee. **C H2OH04131**

Name of Employer n/a Occupation retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
665.30

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 27 / 2012

Transaction ID : SA11D.5113

Amount of Each Receipt this Period
3.75
 In-kind - turnpike toll - cash

C. Full Name (Last, First, Middle Initial)
JAMES M M SLONE

Mailing Address 1504 PARK AVE

City ELYRIA State OH Zip Code 44035

FEC ID number of contributing federal political committee. **C H2OH04131**

Name of Employer n/a Occupation retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
693.70

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 27 / 2012

Transaction ID : SA11D.5117

Amount of Each Receipt this Period
28.40
 In-kind - gasoline purchase

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

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

66.15

112.66

**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 14			
	<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)
Jim Slone 4 Congress Committee

Full Name (Last, First, Middle Initial)
A. Creative Packaging Concepts

Mailing Address 214 Brace Ave

City Elyria State OH Zip Code 44035

Purpose of Disbursement 23750 - poly newspaper bags

Candidate Name **Jim Slone 4 Congress Committee**

Office Sought: House Senate President
State: OH District: 04

Disbursement For: 2012
 Primary General
 Other (specify)

Date of Disbursement: 10 / 26 / 2012

Amount of Each Disbursement this Period: 53.17

Transaction ID : SB17.4948

Category/Type: 004

Full Name (Last, First, Middle Initial)
B. JAMES M M SLONE

Mailing Address 1504 PARK AVE

City ELYRIA State OH Zip Code 44035

Purpose of Disbursement In-kind - turnpike toll - cash

Candidate Name

Office Sought: House Senate President
State: OH District: 04

Disbursement For: 2012
 Primary General
 Other (specify)

Date of Disbursement: 10 / 19 / 2012

Amount of Each Disbursement this Period: 2.50

Transaction ID : SB17.5099

Category/Type:

Full Name (Last, First, Middle Initial)
C. JAMES M M SLONE

Mailing Address 1504 PARK AVE

City ELYRIA State OH Zip Code 44035

Purpose of Disbursement In-kind - gasoline purchase

Candidate Name

Office Sought: House Senate President
State: OH District: 04

Disbursement For: 2012
 Primary General
 Other (specify)

Date of Disbursement: 10 / 21 / 2012

Amount of Each Disbursement this Period: 41.01

Transaction ID : SB17.5102

Category/Type:

SUBTOTAL of Disbursements This Page (optional)..... 96.68

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 11 OF 14			
	<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)
Jim Slone 4 Congress Committee

Full Name (Last, First, Middle Initial) A. JAMES M M SLOANE		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2012
Mailing Address 1504 PARK AVE		Amount of Each Disbursement this Period 3.00 Transaction ID : SB17.5106
City ELYRIA State OH Zip Code 44035	Purpose of Disbursement In-kind - turnpike toll - cash	
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 04	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. JAMES M M SLOANE		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2012
Mailing Address 1504 PARK AVE		Amount of Each Disbursement this Period 34.00 Transaction ID : SB17.5109
City ELYRIA State OH Zip Code 44035	Purpose of Disbursement In-kind - gasoline purchase	
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 04	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. JAMES M M SLOANE		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2012
Mailing Address 1504 PARK AVE		Amount of Each Disbursement this Period 3.75 Transaction ID : SB17.5114
City ELYRIA State OH Zip Code 44035	Purpose of Disbursement In-kind - turnpike toll - cash	
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 04	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	40.75
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 14	
	<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)
Jim Slone 4 Congress Committee

Full Name (Last, First, Middle Initial) A. JAMES M M SLONE		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2012
Mailing Address 1504 PARK AVE		Amount of Each Disbursement this Period 28.40
City ELYRIA	State OH Zip Code 44035	
Purpose of Disbursement In-kind - gasoline purchase	Candidate Name	Transaction ID : SB17.5119
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: OH District: 04	Category/Type	

Full Name (Last, First, Middle Initial) B. Time Warner Cable		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2012
Mailing Address 13195 Collection Center Drive		Amount of Each Disbursement this Period 1396.92
City Chicago	State IL Zip Code 60693	
Purpose of Disbursement Television Ads	Candidate Name Jim Slone 4 Congress Committee	Transaction ID : SB17.4949
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: OH District: 04	Category/Type 004	

Full Name (Last, First, Middle Initial) c. Time Warner Cable		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2012
Mailing Address 13195 Collection Center Drive		Amount of Each Disbursement this Period 1200.00
City Chicago	State IL Zip Code 60693	
Purpose of Disbursement Television Ads	Candidate Name Jim Slone 4 Congress Committee	Transaction ID : SB17.4951
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: OH District: 04	Category/Type 004	

SUBTOTAL of Disbursements This Page (optional).....	2625.32
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 14	
	<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)
Jim Slone 4 Congress Committee

Full Name (Last, First, Middle Initial) A. Time Warner Cable		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address 13195 Collection Center Drive		Amount of Each Disbursement this Period 704.91
City Chicago State IL Zip Code 60693	Category/Type 004	
Purpose of Disbursement Television Ads	Candidate Name Jim Slone 4 Congress Committee	Transaction ID : SB17.4952
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 04	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

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	Category/Type	
Purpose of Disbursement	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

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	Category/Type	
Purpose of Disbursement	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	704.91
TOTAL This Period (last page this line number only).....	3467.66

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Jim Slone 4 Congress Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
JAMES M M SLONE

Mailing Address 1504 PARK AVE

City State Zip Code
ELYRIA OH 44035

Nature of Debt (Purpose):
Reimburse filing fee

Outstanding Balance Beginning This Period **85.00** **Transaction ID : SD10.5211**

Amount Incurred This Period **0.00** Payment This Period **0.00** Outstanding Balance at Close of This Period **85.00**

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	85.00
2) TOTALS This Period (last page this line number only)	85.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	85.00