

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
SQUIRE SANDERS AND DEMPSEY LLP POLITICAL ACTION COMMITTEE 'SQUIRE SANDERS PAC'

ADDRESS (number and street) 1201 PENNSYLVANIA AVENUE NW
 Check if different than previously reported. (ACC)
WASHINGTON DC 20004

2. **FEC IDENTIFICATION NUMBER** C00444935
3. IS THIS REPORT NEW (N) OR AMENDED (A)

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 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 04 01 2010 through 04 30 2010

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 Robert Lehman

Signature of Treasurer Electronically Filed by Robert Lehman Date 05 20 2010

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									
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FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name

SQUIRE SANDERS AND DEMPSEY LLP POLITICAL ACTION COMMITTEE 'SQUIRE SANDERS PAC'

Report Covering the Period: From: To:

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <input type="text" value="2010"/>		116073.01
(b) Cash on Hand at Beginning of Reporting Period	44437.88	
(c) Total Receipts (from Line 19)	969.12	3019.12
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	45407.00	119092.13
7. Total Disbursements (from Line 31)	39700.00	113385.13
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	5707.00	5707.00
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)	8537.71	

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

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 3X (Rev. 06/2004)

Write or Type Committee Name

SQUIRE SANDERS AND DEMPSEY LLP POLITICAL ACTION COMMITTEE 'SQUIRE SANDERS PAC'

Report Covering the Period: From: To:

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	0.00	2050.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	2050.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	0.00	2050.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	969.12	969.12
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	969.12	3019.12
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	969.12	3019.12

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	1505.13
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	1505.13
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9000.00	35000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. 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 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	30700.00	76880.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	39700.00	113385.13
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	39700.00	113385.13

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3	0.00	2050.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	2050.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	1505.13
37. Offsets to Operating Expenditures (from Line 15, page 3)	969.12	969.12
38. Net Operating Expenditures (subtract Line 37 from Line 36)	-969.12	536.01

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 / 22
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input checked="" 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)
SQUIRE SANDERS AND DEMPSEY LLP POLITICAL ACTION COMMITTEE 'SQUIRE SANDERS PAC'

A.

Full Name (Last, First, Middle Initial) Squire, Sanders & Dempsey LLP		Date of Receipt
Mailing Address 1300 Huntington Center 41 South High Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 04 / 30 / 2010
City	State	Zip Code
Columbus	OH	43215
FEC ID number of contributing federal political committee.		Transaction ID: SA15.9463
<input type="text"/> C		Amount of Each Receipt this Period
Name of Employer		<input type="text"/> 969.12
Occupation		All administrative and salary expenses.
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼		
<input type="text"/> 969.12		

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 969.12
TOTAL This Period (last page this line number only)	<input type="text"/> 969.12

A. Form/Schedule : **SA15**
Transaction ID : **SA15.9463**

As part of a 2009 year end audit, it was determined that there was an overpayment by the PAC for administrative and salary expenses in the amount of \$969.12. The PAC was refunded that amount by Squire, Sanders & Dempsey L.L.P. on April 30, 2010.

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 / 22

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

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NAME OF COMMITTEE (In Full)

SQUIRE SANDERS AND DEMPSEY LLP POLITICAL ACTION COMMITTEE 'SQUIRE SANDERS PAC'

A.

Full Name (Last, First, Middle Initial)
Squire, Sanders & Dempsey LLP

Mailing Address 1300 Huntington Center
41 South High Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Legal and accounting services.

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.9453

Date of Disbursement

04 / 30 / 2010

Amount of Each Disbursement this Period

0.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

0.00

A. Form/Schedule : **SB21B**
Transaction ID : **SB21B.9453**

Legal and accounting services valued at \$10,491.00 have been provided to the PAC to maintain compliance with federal campaign finance law. The legal and accounting personnel providing these services are Mary Mertz, Alison DeGiorgio, Tim Carroll and Jeffrey Weber.

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SQUIRE SANDERS AND DEMPSEY LLP POLITICAL ACTION COMMITTEE 'SQUIRE SANDERS PAC'

A.	Full Name (Last, First, Middle Initial) Bill Nelson for Senate Mailing Address Lisa Dowling, Treasurer 3232 S. MacDill Ave., Unit 105 City Tampa State FL Zip Code 33629 Purpose of Disbursement Campaign contribution Candidate Name Bill Nelson Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: FL District:	Transaction ID: SB23.9444 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 1 0	Amount of Each Disbursement this Period 2500.00
B.	Full Name (Last, First, Middle Initial) Boucher for Congress Mailing Address P.O. Box 2000 City Abingdon State VA Zip Code 24212 Purpose of Disbursement Campaign contribution Candidate Name Rick Boucher Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: VA District: 09	Transaction ID: SB23.9438 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 1 0	Amount of Each Disbursement this Period 1500.00
C.	Full Name (Last, First, Middle Initial) Brady for Congress Mailing Address 104 Hume Avenue City Alexandria State VA Zip Code 22301 Purpose of Disbursement Campaign contribution Candidate Name Kevin Brady Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TX District: 08	Transaction ID: SB23.9418 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 1 0	Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional)	5000.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SQUIRE SANDERS AND DEMPSEY LLP POLITICAL ACTION COMMITTEE 'SQUIRE SANDERS PAC'

A.	Full Name (Last, First, Middle Initial) Cedric Richmond for Congress Mailing Address c/o Andrea Dube, Finance Director 1631 Elysian Fields, P.O. Box 150 City New Orleans State LA Zip Code 70117 Purpose of Disbursement Campaign Contribution Candidate Name Cedric Richmond Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 02 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.9381 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 1 0	Amount of Each Disbursement this Period 1000.00
B.	Full Name (Last, First, Middle Initial) Davis for Congress Mailing Address c/o The Gula Graham Group 700 12th Street, NW, Suite 700 City Washington State DC Zip Code 20005 Purpose of Disbursement Campaign contribution Candidate Name Geoff Davis Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 04 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.9447 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 1 0	Amount of Each Disbursement this Period 1000.00
C.	Full Name (Last, First, Middle Initial) Kaptur for Congress Mailing Address 110 D Street, SE, #312 City Washington State DC Zip Code 20003 Purpose of Disbursement Campaign contribution Candidate Name Marcy Kaptur Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 09 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.9450 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 1 0	Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SQUIRE SANDERS AND DEMPSEY LLP POLITICAL ACTION COMMITTEE 'SQUIRE SANDERS PAC'

A.

Full Name (Last, First, Middle Initial)

Pete Olson for Congress

Mailing Address 8410 Hwy. 90A; Ste. 160

City State Zip Code
Sugar Land TX 77478

Purpose of Disbursement
Campaign contribution

Candidate Name
Pete Olson

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: TX District: 22

Transaction ID: SB23.9441

Date of Disbursement

04 / 19 / 2010

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

1000.00

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

9000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SQUIRE SANDERS AND DEMPSEY LLP POLITICAL ACTION COMMITTEE 'SQUIRE SANDERS PAC'

<p>A. Full Name (Last, First, Middle Initial) Citizens for Better Schools Committee</p> <p>Mailing Address c/o Al Volin, Treasurer 33125 Cedar Branch Circle</p> <p>City North Ridgeville State OH Zip Code 44039</p> <p>Purpose of Disbursement Nonfederal Contribution</p> <p>Candidate Name Citizens for Better Schools Committee</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.9411</p> <p>Date of Disbursement 04 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Citizens for Buehrer</p> <p>Mailing Address c/o Sandra K. Barber, Treasurer 704 Greenview Drive</p> <p>City Delta State OH Zip Code 43515</p> <p>Purpose of Disbursement Nonfederal Contribution</p> <p>Candidate Name Steve Buehrer</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.9392</p> <p>Date of Disbursement 04 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>011 Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Citizens for Carey</p> <p>Mailing Address c/o Karen Hammond, Treasurer 401 S. Arkansas Avenue</p> <p>City Wellston State OH Zip Code 45692</p> <p>Purpose of Disbursement Nonfederal Contribution</p> <p>Candidate Name John Carey</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.9391</p> <p>Date of Disbursement 04 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3250.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
SQUIRE SANDERS AND DEMPSEY LLP POLITICAL ACTION COMMITTEE 'SQUIRE SANDERS PAC'

A.	Full Name (Last, First, Middle Initial) Citizens for Lakewood's Children	Transaction ID: SB29.9406 Date of Disbursement
	Mailing Address Tom Einhouse, Fundraising Chairman 1609 Robinwood Avenue	<input type="text" value="04"/> / <input type="text" value="05"/> / <input type="text" value="2010"/>
	City Lakewood State OH Zip Code 44107	Amount of Each Disbursement this Period
	Purpose of Disbursement Nonfederal Contribution	<input type="text" value="250.00"/>
	Candidate Name Citizens for Lakewood's Children	<input type="text" value="011"/> Category/Type
	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:	

B.	Full Name (Last, First, Middle Initial) Citizens for Schools	Transaction ID: SB29.9430 Date of Disbursement
	Mailing Address c/o Peg Elwell, Treasurer 11220 Mitchell Road	<input type="text" value="04"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City Columbia Station State OH Zip Code 44028	Amount of Each Disbursement this Period
	Purpose of Disbursement Nonfederal contribution	<input type="text" value="250.00"/>
	Candidate Name Citizens for Schools	<input type="text" value="011"/> Category/Type
	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:	

C.	Full Name (Last, First, Middle Initial) Committee for Shaker Schools	Transaction ID: SB29.9412 Date of Disbursement
	Mailing Address John Murphy 15915 Onaway Road	<input type="text" value="04"/> / <input type="text" value="05"/> / <input type="text" value="2010"/>
	City Shaker Heights State OH Zip Code 44120	Amount of Each Disbursement this Period
	Purpose of Disbursement Nonfederal Contribution	<input type="text" value="500.00"/>
	Candidate Name Committee for Shaker Schools	<input type="text" value="011"/> Category/Type
	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)	<input type="text" value="1000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SQUIRE SANDERS AND DEMPSEY LLP POLITICAL ACTION COMMITTEE 'SQUIRE SANDERS PAC'

<p>A. Full Name (Last, First, Middle Initial) Committee to Elect Niehaus</p> <p>Mailing Address c/o Emily Niehaus, Treasurer 1131 Little Indian Creek Road</p> <p>City New Richmond State OH Zip Code 45157</p> <p>Purpose of Disbursement Nonfederal Contribution</p> <p>Candidate Name Tom Niehaus</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.9389</p> <p>Date of Disbursement 04 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) French for Judge</p> <p>Mailing Address Miranda Motter, Treasurer 100 South Third Street</p> <p>City Columbus State OH Zip Code 43215</p> <p>Purpose of Disbursement Nonfederal contribution</p> <p>Candidate Name Judi French</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.9435</p> <p>Date of Disbursement 04 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Friends of Faber</p> <p>Mailing Address c/o Dale Schwieterman, Treasurer 7706 State Route 703</p> <p>City Celina State OH Zip Code 45822</p> <p>Purpose of Disbursement Nonfederal Contribution</p> <p>Candidate Name Keith Faber</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.9390</p> <p>Date of Disbursement 04 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

6000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SQUIRE SANDERS AND DEMPSEY LLP POLITICAL ACTION COMMITTEE 'SQUIRE SANDERS PAC'

A.	Full Name (Last, First, Middle Initial) Friends of Tom Patton <hr/> Mailing Address c/o John Southworth, Treasurer 17157 Rabbit Run Drive <hr/> City Strongsville State OH Zip Code 44136 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name Tom Patton 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:	Transaction ID: SB29.9388 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 1 0	Amount of Each Disbursement this Period 1000.00
B.	Full Name (Last, First, Middle Initial) Judge Cocroft Committee <hr/> Mailing Address Necol Russell-Washington, Treasurer 1480 Dublin Road <hr/> City Columbus State OH Zip Code 43215 <hr/> Purpose of Disbursement Nonfederal contribution Candidate Name Kimberly Cocroft 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:	Transaction ID: SB29.9426 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 1 0	Amount of Each Disbursement this Period 1000.00
C.	Full Name (Last, First, Middle Initial) Judge Julie Lynch Committee <hr/> Mailing Address William L. Curlis, Treasurer 685 Macon Alley <hr/> City Columbus State OH Zip Code 43206 <hr/> Purpose of Disbursement Nonfederal contribution Candidate Name Julie Lynch 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:	Transaction ID: SB29.9431 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 1 0	Amount of Each Disbursement this Period 1300.00

SUBTOTAL of Disbursements This Page (optional) ▶

3300.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
SQUIRE SANDERS AND DEMPSEY LLP POLITICAL ACTION COMMITTEE 'SQUIRE SANDERS PAC'

A.	Full Name (Last, First, Middle Initial) Kasich Taylor for Ohio	Transaction ID: SB29.9397 Date of Disbursement 04 / 05 / 2010
	Mailing Address c/o Brad Sinnott, Treasurer 340 East Gay Street	Amount of Each Disbursement this Period 7000.00
	City Columbus State OH Zip Code 43215	
	Purpose of Disbursement Nonfederal Contribution Candidate Name John Kasich	011 Category/ Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) North Baltimore Citizens for Quality Schools	Transaction ID: SB29.9408 Date of Disbursement 04 / 05 / 2010
	Mailing Address Gregg Glamm, Treasurer 1145 N. Baltimore Road South	Amount of Each Disbursement this Period 300.00
	City North Baltimore State OH Zip Code 45872	
	Purpose of Disbursement Nonfederal Contribution Candidate Name North Baltimore Citizens for Quality Schools	011 Category/ Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Residents for a Quality Community	Transaction ID: SB29.9421 Date of Disbursement 04 / 12 / 2010
	Mailing Address Bruce Thomas, Treasurer 5013 Grace Road	Amount of Each Disbursement this Period 250.00
	City North Olmsted State OH Zip Code 44070	
	Purpose of Disbursement Nonfederal contribution Candidate Name Residents for a Quality Community	011 Category/ Type
	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)	7550.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SQUIRE SANDERS AND DEMPSEY LLP POLITICAL ACTION COMMITTEE 'SQUIRE SANDERS PAC'

A. Full Name (Last, First, Middle Initial) Revere Levy Committee Mailing Address Karen Smik, Treasurer 3823 Faith Lane City Richfield State OH Zip Code 44286 Purpose of Disbursement Nonfederal contribution Candidate Name Revere Levy Committee 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:	Transaction ID: SB29.9424 Date of Disbursement 04 / 12 / 2010
	Amount of Each Disbursement this Period 250.00
	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Robart for Mayor Committee Mailing Address Joseph Brodzinski, Treasurer 2460 19th Street City Cuyahoga Falls State OH Zip Code 44223 Purpose of Disbursement Nonfederal contribution Candidate Name Don Robart 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:	Transaction ID: SB29.9429 Date of Disbursement 04 / 19 / 2010
	Amount of Each Disbursement this Period 600.00
	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Shelby School Levy Committee Mailing Address Tom Roberts, c/o Elizabeth Anatra 1229 North Park Road City Crestline State OH Zip Code 44827 Purpose of Disbursement Nonfederal Contribution Candidate Name Shelby School Levy Committee 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:	Transaction ID: SB29.9414 Date of Disbursement 04 / 05 / 2010
	Amount of Each Disbursement this Period 350.00
	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

1200.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 20 / 22

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SQUIRE SANDERS AND DEMPSEY LLP POLITICAL ACTION COMMITTEE 'SQUIRE SANDERS PAC'

A.

Full Name (Last, First, Middle Initial)

The Committee for Schools

Transaction ID: SB29.9416

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	0

Mailing Address c/o Angela Jordan, Treasurer
1521 Highland Green Drive

City Toledo State OH Zip Code 43614

Amount of Each Disbursement this Period

1500.00

Purpose of Disbursement
Nonfederal Contribution

011
Category/
Type

Candidate Name
The Committee for Schools

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)

The Committee to Elect Bill Harris

Transaction ID: SB29.9386

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	0

Mailing Address Jim Hess, Treasurer
1238 Township Road

City Ashland State OH Zip Code 44805

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement
Nonfederal Contribution

011
Category/
Type

Candidate Name
Bill Harris

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

29900.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 21 / 22	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
 SQUIRE SANDERS AND DEMPSEY LLP POLITICAL ACTION COMMITTEE 'SQUIRE SANDERS PAC'

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Squire, Sanders & Dempsey LLP	Nature of Debt (Purpose): Invoice received for all administrative and salary expenses.
Mailing Address 1300 Huntington Center 41 South High Street	
City State ZIP Code Columbus OH 43215	

Outstanding Balance Beginning This Period	Transaction ID: SD10.9469	
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
8537.71	0.00	8537.71

1) SUBTOTALS This Period This Page (optional).....	8537.71
2) TOTALS This Period (last page this line number only).....	8537.71
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)	8537.71

A. Form/Schedule : **SD10**
Transaction ID : **SD10.9469**

An invoice for the amount owed was received during the time period covered by this report but as of the filing of this report the amount has not been paid. The amount reflects an advanced payment owed for administrative expenses incurred by Squire, Sanders & Dempsey L.L.P. in support of the PAC. The amount owed covers salary, overhead (office and utilities), expenses (copies and telephone service) and any other administrative costs.