

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

Office use only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines

12FE4M5

Ohio Credit Union League PAC

ADDRESS (number and street)

10 West Broad St

(Check if address is changed)

Suite 1100

Columbus

OH

43017

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

skessinger@ohiocul.org

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

6143362895

2. DATE

10 / 23 / 2008

3. FEC IDENTIFICATION NUMBER

C C00349902

4. IS THIS STATEMENT

NEW (N)

OR

AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete

Type or Print Name of Treasurer

Cathrine Herring

Signature of Treasurer

Electronically Filed by Cathrine Herring

Date

10 / 23 / 2008

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. S437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

Office Use Only

For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100

FEC FORM 1 (Revised 12/2007)

5. TYPE OF COMMITTEE (Check One)

Candidate Committee:

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate _____

Candidate Party Affiliation Office Sought: House Senate President State
 District

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

- (d) This committee is a (National, State (or subordinate) committee of the (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
 - Corporation Corporation w/o Capital Stock Labor Organization
 - Membership Organization Trade Association Cooperative
- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
 - 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 proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. _____	FEC ID number	C <input type="text"/>
2. _____	FEC ID number	C <input type="text"/>
3. _____	FEC ID number	C <input type="text"/>
4. _____	FEC ID number	C <input type="text"/>
5. _____	FEC ID number	C <input type="text"/>

Write or Type Committee Name

Ohio Credit Union League PAC

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

Ohio Credit Union League

Mailing Address **10 West Broad Street**
Suite 1100
Columbus **OH** **43215**
CITY ▲ STATE ▲ ZIP CODE ▲

Relationship:

Connected Organization Affiliated Committee Leadership PAC Sponsor Joint Fundraising Representative

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

Full Name **Shawn Kessinger**
Mailing Address **10 West Broad Street**
Suite 1100
Columbis **OH** **43215**
Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲
Custodian of Records Telephone number **614** - **336** - **2894**

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 **Catherine Herring**
Mailing Address **10 West Broad Street**
Suite 1100
Columbus **OH** **43215**
Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲
Treasurer Telephone number **614** - **336** - **2894**

Full Name of Designated Agent

John Florian

Mailing Address

10 West Broad Street

Suite 1100

Columbus

OH

43215

Title or Position

CITY

STATE

ZIP CODE

Assistant Treasurer

Telephone number

614

336

2894

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 Bank, Depository, etc.

Corporate One Federal Credit Union

Mailing Address

8700 Orion Pl

Columbus

OH

43240

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

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 Bank, Depository, etc.

[ADDITIONAL]

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

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

[ADDITIONAL]

CULAC

Mailing Address

601 Pennsylvania Ave NW

South Building, Suite 600

Washington

DC

20004

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:

Connected Organization

Affiliated Committee

Leadership PAC Sponsor

Joint Fundraising Representative

Designated Agent

[ADDITIONAL]

Full Name

Mailing Address

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

Joint Fundraiser Participant

[ADDITIONAL]

FEC ID number

C