

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines. 12FE4M5  
Kasich for America, Inc.

ADDRESS (number and street) 4679 Winterset Drive  
▼  Check if different than previously reported. (ACC) Columbus OH 43220

2. **FEC IDENTIFICATION NUMBER** ▼ C00581876 **CITY** ▲ **STATE** ▲ **ZIP CODE** ▲  
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 Year-End 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 (12S)  
Election on M M / D D / Y Y Y Y Y Y in the State of    
(d) 30-Day **POST-Election** Report for the:  General (30G)  Runoff (30R)  Special (30S)  
Election on M M / D D / Y Y Y Y Y Y in the State of  

5. Covering Period 01 / 01 / 2017 through 06 / 30 / 2017

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Yuskewich, J. Matthew, , ,  
Type or Print Name of Treasurer

Signature of Treasurer Yuskewich, J. Matthew, , , [Electronically Filed] Date 07 / 30 / 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

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Page 2

Write or Type Committee Name

**Kasich for America, Inc.**

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="2017"/>		<input type="text" value="158566.66"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="158566.66"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="57328.49"/>	<input type="text" value="60225.70"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="215895.15"/>	<input type="text" value="218792.36"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="77879.21"/>	<input type="text" value="98251.39"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="138015.94"/>	<input type="text" value="120540.97"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

Write or Type Committee Name

**Kasich for America, Inc.**

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).....	12900.00	12900.00
(ii) Unitemized .....	40782.00	40967.00
(iii) TOTAL (add Lines 11(a)(i) and (ii).....▶	53682.00	53867.00
(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) .....	53682.00	53867.00
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).....	3646.49	6358.70
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 Transfers (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)) .....	57328.49	60225.70
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	57328.49	60225.70

**DETAILED SUMMARY PAGE**

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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 .....	75879.21	90551.39
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	75879.21	90551.39
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 .....	1000.00	6700.00
(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)).....	1000.00	6700.00
29. Other Disbursements (Including Non-Federal Donations).....	1000.00	1000.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated 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)) ..	77879.21	98251.39
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	77879.21	98251.39

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	53682.00	53867.00
34. Total Contribution Refunds (from Line 28(d)) .....	1000.00	6700.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	52682.00	47167.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	75879.21	90551.39
37. Offsets to Operating Expenditures (from Line 15, page 3).....	3646.49	6358.70
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	72232.72	84192.69

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

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

FOR LINE NUMBER: PAGE 6 OF 32  
(check only one)

<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
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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)  
**Kasich for America, Inc.**

**A. Allen, Richard, V., Mr.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3201 E 7th Avenue Parkway

City Denver	State CO	Zip Code 80206-3916
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self	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 Y  
 05 / 16 / 2017

**Transaction ID : A1CB1E3F497EE474BAD1**

Amount of Each Receipt this Period  
1500.00

Memo Item

**B. Bruckner, Don, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 911 Wagon Train SE

City Albuquerque	State NM	Zip Code 87123-4141
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Guebert Bruckner P.C.	Occupation (for Individual) Attorney
------------------------------------------------------------	-----------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 29 / 2017

**Transaction ID : A5516BC3A779345BAAE5**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C. Denton, Eric, , Mr.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2423 SW 172nd St

City Burien	State WA	Zip Code 98166-3255
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
----------------------------------------------	----------------------------------------

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 Y  
 06 / 29 / 2017

**Transaction ID : AEE2D0CD4A21E4C5B83D**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2750.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 7 OF 32
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Kasich for America, Inc.**

**A. Dexter, Kathryn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 964 Creek View Lane  
 City Redlands State CA Zip Code 92373-6974  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 08 / 2017  
**Transaction ID : AFB9402E8F1264F47A56**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Fredi, Joseph, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1040 Falling Leaf Circle  
 City Brentwood State TN Zip Code 37027-6216  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vanderbilt University Medical Center Occupation (for Individual) Cardiologist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 07 / 2017  
**Transaction ID : A1C448636D2ED49F785B**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. Gleason, Gregory, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 908 Hermosa Dr NE  
 City Albuquerque State NM Zip Code 87110-7710  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) University Of New Mexico Occupation (for Individual) Professor  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 15 / 2017  
**Transaction ID : A8B44235BCDFC498BAB1**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 OF 32
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Kasich for America, Inc.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Gore, W Kyle, , ,</b>			Date of Receipt
Mailing Address 631 West Timonium Road			<input type="text" value="05"/> / <input type="text" value="18"/> / <input type="text" value="2017"/>
City Lutherville	State MD	Zip Code 21093-1828	<b>Transaction ID : A5D8FC123BF034CD8928</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="150.00"/>
Name of Employer (for Individual) CGA Capital, LLC		Occupation (for Individual) Investment Banker	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. James, William, E., ,</b>			Date of Receipt
Mailing Address 31 Phillips Avenue			<input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2017"/>
City Rockport	State MA	Zip Code 01966-1126	<b>Transaction ID : ACB1E8F7A4086427093F</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Name of Employer (for Individual) Rockport Capital		Occupation (for Individual) General Partner	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Lucas, Jr., Harry, , ,</b>			Date of Receipt
Mailing Address 327 Congress Avenue, Suite. 500			<input type="text" value="05"/> / <input type="text" value="18"/> / <input type="text" value="2017"/>
City Austin	State TX	Zip Code 78701-3656	<b>Transaction ID : AA13A12DDBDF245C5989</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="1000.00"/>
Name of Employer (for Individual) Lucas Petroleum Group		Occupation (for Individual) Chairman	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<input type="text" value="6150.00"/>
<b>TOTAL</b> This Period (last page this line number only).....	<input type="text"/>



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 OF 32
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Kasich for America, Inc.**

**A. Meyer, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3409 Nicolet Drive  
 City Green Bay State WI Zip Code 54311-7203  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Pediatrician  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **02 / 08 / 2017**  
**Transaction ID : A32740E0EDCB143C2ADF**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Rogers, Arthur, , Mr.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1802 West Bell Street  
 City Houston State TX Zip Code 77019-4910  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **06 / 26 / 2017**  
**Transaction ID : A0567490FBB55499C8FA**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Roth, Jay, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 111 north norton ave  
 City Los Angeles State CA Zip Code 90004-3912  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Directors guild of america Occupation (for Individual) Executive  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **05 / 11 / 2017**  
**Transaction ID : A12B99618D67B46459A5**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1750.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 10 OF 32
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Kasich for America, Inc.**

**A. Roy, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 3668  
 City Lafayette State LA Zip Code 70502-3668  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Domengeaux Wright Roy & Edwards LLC Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **04 / 26 / 2017**  
**Transaction ID : AE3583231D466498C8BB**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Thomsen, Mikal, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 3685  
 City Bellevue State WA Zip Code 98009-3685  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Investor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 04 / 2017**  
**Transaction ID : A581260D156344A0BB66**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼

Date of Receipt  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	500.00
<b>TOTAL</b> This Period (last page this line number only).....	12900.00

**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 11 OF 32
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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NAME OF COMMITTEE (In Full)  
**Kasich for America, Inc.**

**A. Arena Online**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1780 W Sequoia Vista Cir

City Salt Lake City	State UT	Zip Code 84104-5102
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1352.80

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	25	/	2017

**Transaction ID : A123C591F333E436AAC5**

Amount of Each Receipt this Period  
1352.80

Memo Item  
Refund

**B. Macmillan Publishing**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 175 FIFTH AVENUE

City New York	State NY	Zip Code 10010-7703
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1623.28

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	20	/	2017

**Transaction ID : A0366268545FF4B62B05**

Amount of Each Receipt this Period  
1623.28

Memo Item  
Reimburse Email Costs

**C. State of South Carolina**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 125

City Columbia	State SC	Zip Code 29202-0125
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
616.73

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2017

**Transaction ID : A27584D8E3659471B877**

Amount of Each Receipt this Period  
616.73

Memo Item  
Payroll tax refund

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3592.81
<b>TOTAL</b> This Period (last page this line number only).....	3592.81

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)  
**Kasich for America, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Arena Online</b>		Date of Disbursement MM / DD / YYYY 04 / 06 / 2017
Mailing Address 1780 W Sequoia Vista Cir		FEC Identification Number C [REDACTED] <b>Transaction ID : B756A0952E</b> Amount of Each Disbursement this Period 495.00
City Salt Lake City	State UT	Zip Code 84104-5102
Purpose of Disbursement Web hosting		Category/ Type
Candidate Name		
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Arena Online</b>		Date of Disbursement MM / DD / YYYY 06 / 06 / 2017
Mailing Address 1780 W Sequoia Vista Cir		FEC Identification Number C [REDACTED] <b>Transaction ID : B62DCDC8CE</b> Amount of Each Disbursement this Period 947.50
City Salt Lake City	State UT	Zip Code 84104-5102
Purpose of Disbursement Web site maintenance		Category/ Type
Candidate Name		
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Aristotle International, Inc.</b>		Date of Disbursement MM / DD / YYYY 01 / 27 / 2017
Mailing Address 205 Pennsylvania Ave SE		FEC Identification Number C [REDACTED] <b>Transaction ID : B370BC64C</b> Amount of Each Disbursement this Period 1000.00
City Washington	State DC	Zip Code 20003-1164
Purpose of Disbursement Compliance Software		Category/ Type
Candidate Name		
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:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2442.50
<b>TOTAL</b> 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)  
**Kasich for America, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Aristotle International, Inc.</b>		Date of Disbursement MM / DD / YYYY 03 / 10 / 2017	
Mailing Address 205 Pennsylvania Ave SE		FEC Identification Number C [ ] <b>Transaction ID : B28BFB1A13</b> Amount of Each Disbursement this Period [ ] 500.00	
City Washington	State DC	Zip Code 20003-1164	Category/ Type [ ]
Purpose of Disbursement Compliance Software		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Aristotle International, Inc.</b>		Date of Disbursement MM / DD / YYYY 03 / 24 / 2017	
Mailing Address 205 Pennsylvania Ave SE		FEC Identification Number C [ ] <b>Transaction ID : B50A7D7D74!</b> Amount of Each Disbursement this Period [ ] 500.00	
City Washington	State DC	Zip Code 20003-1164	Category/ Type [ ]
Purpose of Disbursement Compliance Software		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Aristotle International, Inc.</b>		Date of Disbursement MM / DD / YYYY 05 / 30 / 2017	
Mailing Address 205 Pennsylvania Ave SE		FEC Identification Number C [ ] <b>Transaction ID : B676B02D07</b> Amount of Each Disbursement this Period [ ] 1000.00	
City Washington	State DC	Zip Code 20003-1164	Category/ Type [ ]
Purpose of Disbursement Compliance Software		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 2000.00
<b>TOTAL</b> 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)  
**Kasich for America, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Baker &amp; Hostetler LLP</b>		Date of Disbursement MM / DD / YYYY 05 / 30 / 2017
Mailing Address PO Box 70189		FEC Identification Number C <b>Transaction ID : B42059F8D9I</b> Amount of Each Disbursement this Period 20000.00
City Cleveland	State OH	
Zip Code 44190-0189	Purpose of Disbursement Legal Consulting	Memo Item <input type="checkbox"/>
Candidate Name	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:		

Full Name (Last, First, Middle Initial) <b>B. Bingle, Kevin, , Mr.,</b>		Date of Disbursement MM / DD / YYYY 06 / 29 / 2017
Mailing Address 408 E Schreyer Pl		FEC Identification Number C <b>Transaction ID : B563EF0D99I</b> Amount of Each Disbursement this Period 6087.90
City Columbus	State OH	
Zip Code 43214-2214	Purpose of Disbursement Reimburse Shipping Expenses	Memo Item <input type="checkbox"/>
Candidate Name	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:		

Full Name (Last, First, Middle Initial) <b>C. Federal Express</b>		Date of Disbursement MM / DD / YYYY 06 / 29 / 2017
Mailing Address 2424 Citygate		FEC Identification Number C <b>Transaction ID : B9E0F3F000</b> Amount of Each Disbursement this Period 6087.90
City Columbus	State OH	
Zip Code 43219-3590	Purpose of Disbursement Reimburse Shipping Expenses	Memo Item <input checked="" type="checkbox"/>
Candidate Name	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)..... ▶

26087.90

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)  
**Kasich for America, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Bookpal</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2017
Mailing Address 18101 Von Karman Ave Ste 120		FEC Identification Number C [REDACTED] <b>Transaction ID : B420CD3335'</b> Amount of Each Disbursement this Period 1744.73
City Irvine	State CA	Zip Code 92612-0167
Purpose of Disbursement Book Purchase		Category/ Type
Candidate Name		
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Google, Inc.</b>		Date of Disbursement MM / DD / YYYY 01 / 06 / 2017
Mailing Address 1600 Amphitheatre Pkwy		FEC Identification Number C [REDACTED] <b>Transaction ID : BC6BA32CD9'</b> Amount of Each Disbursement this Period 130.00
City Mountain View	State CA	Zip Code 94043-1351
Purpose of Disbursement Emails		Category/ Type
Candidate Name		
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Google, Inc.</b>		Date of Disbursement MM / DD / YYYY 02 / 06 / 2017
Mailing Address 1600 Amphitheatre Pkwy		FEC Identification Number C [REDACTED] <b>Transaction ID : B27BFDF39E'</b> Amount of Each Disbursement this Period 130.00
City Mountain View	State CA	Zip Code 94043-1351
Purpose of Disbursement Emails		Category/ Type
Candidate Name		
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:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2004.73
<b>TOTAL</b> 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)  
**Kasich for America, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Google, Inc.</b>		Date of Disbursement MM / DD / YYYY 03 / 07 / 2017	
Mailing Address 1600 Amphitheatre Pkwy		FEC Identification Number C [ ] <b>Transaction ID : BF29C1C9A2</b> Amount of Each Disbursement this Period [ ] 130.00	
City Mountain View	State CA	Zip Code 94043-1351	Category/ Type [ ]
Purpose of Disbursement Emails		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Google, Inc.</b>		Date of Disbursement MM / DD / YYYY 04 / 07 / 2017	
Mailing Address 1600 Amphitheatre Pkwy		FEC Identification Number C [ ] <b>Transaction ID : B9B5B7DC30</b> Amount of Each Disbursement this Period [ ] 130.00	
City Mountain View	State CA	Zip Code 94043-1351	Category/ Type [ ]
Purpose of Disbursement Emails		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Google, Inc.</b>		Date of Disbursement MM / DD / YYYY 05 / 08 / 2017	
Mailing Address 1600 Amphitheatre Pkwy		FEC Identification Number C [ ] <b>Transaction ID : BD70554C56</b> Amount of Each Disbursement this Period [ ] 130.00	
City Mountain View	State CA	Zip Code 94043-1351	Category/ Type [ ]
Purpose of Disbursement Emails		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 390.00
<b>TOTAL</b> 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)  
**Kasich for America, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Google, Inc.</b>		Date of Disbursement MM / DD / YYYY 06 / 07 / 2017
Mailing Address 1600 Amphitheatre Pkwy		FEC Identification Number C [REDACTED] <b>Transaction ID : BDA1431158</b> Amount of Each Disbursement this Period [REDACTED] 130.00
City Mountain View	State CA	Zip Code 94043-1351
Purpose of Disbursement Emails	Category/Type [REDACTED]	
Candidate Name	Memo Item <input type="checkbox"/>	
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:		

Full Name (Last, First, Middle Initial) <b>B. Huntington Bank</b>		Date of Disbursement MM / DD / YYYY 02 / 07 / 2017
Mailing Address PO Box 1558		FEC Identification Number C [REDACTED] <b>Transaction ID : B7047EEB7E</b> Amount of Each Disbursement this Period [REDACTED] 375.33
City Columbus	State OH	Zip Code 43216-1558
Purpose of Disbursement Credit Card Payment	Category/Type [REDACTED]	
Candidate Name	Memo Item <input type="checkbox"/>	
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:		

Full Name (Last, First, Middle Initial) <b>C. Huntington Bank</b>		Date of Disbursement MM / DD / YYYY 02 / 15 / 2017
Mailing Address PO Box 1558		FEC Identification Number C [REDACTED] <b>Transaction ID : BBC317B9C</b> Amount of Each Disbursement this Period [REDACTED] 97.35
City Columbus	State OH	Zip Code 43216-1558
Purpose of Disbursement Bank Fees	Category/Type [REDACTED]	
Candidate Name	Memo Item <input type="checkbox"/>	
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>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 602.68
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)  
**Kasich for America, Inc.**

Full Name (Last, First, Middle Initial)

**A. Huntington Bank**

Mailing Address PO Box 1558

City Columbus State OH Zip Code 43216-1558

Purpose of Disbursement  
Credit Card Payment

Candidate Name

Office Sought:  House  Senate  President  
State: District: Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 10 / 2017

FEC Identification Number

C  
Transaction ID : BFFBCC21E  
Amount of Each Disbursement this Period  
75.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Icontact**

Mailing Address PO Box 418296

City Boston State MA Zip Code 02241-8296

Purpose of Disbursement  
Emails

Candidate Name

Office Sought:  House  Senate  President  
State: District: Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 10 / 2017

FEC Identification Number

C  
Transaction ID : B95F7D14611  
Amount of Each Disbursement this Period  
75.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Huntington National Bank**

Mailing Address 41 South High Street, Attn KIMVOG

City Columbus State OH Zip Code 43215-3406

Purpose of Disbursement  
Bank Service Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District: Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 15 / 2017

FEC Identification Number

C  
Transaction ID : B2D1AC4207  
Amount of Each Disbursement this Period  
99.40

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

174.40

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)  
**Kasich for America, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Huntington National Bank</b>		Date of Disbursement MM / DD / YYYY 03 / 29 / 2017
Mailing Address 41 South High Street, Attn KIMVOG		FEC Identification Number C [REDACTED] <b>Transaction ID : B071F371B2</b> Amount of Each Disbursement this Period [REDACTED] 3659.18
City Columbus	State OH	Zip Code 43215-3406
Purpose of Disbursement Credit Card Payment		Category/ Type [REDACTED]
Candidate Name		
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Hyde Park Resturants</b>		Date of Disbursement MM / DD / YYYY 03 / 29 / 2017
Mailing Address 569 N. High Street		FEC Identification Number C [REDACTED] <b>Transaction ID : B98B4040C2</b> Amount of Each Disbursement this Period [REDACTED] 592.40
City Columbus	State OH	Zip Code 43215-2080
Purpose of Disbursement Food and Beverages for Volunteers		Category/ Type [REDACTED]
Candidate Name		
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Strongwater Food and Spirits</b>		Date of Disbursement MM / DD / YYYY 03 / 29 / 2017
Mailing Address 401 W Town St		FEC Identification Number C [REDACTED] <b>Transaction ID : BEC8FA8EB</b> Amount of Each Disbursement this Period [REDACTED] 3066.78
City Columbus	State OH	Zip Code 43215-4034
Purpose of Disbursement Food and Beverages for Volunteers		Category/ Type [REDACTED]
Candidate Name		
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:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 3659.18
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)  
**Kasich for America, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Huntington National Bank</b>		Date of Disbursement MM / DD / YYYY 04 / 17 / 2017
Mailing Address 41 South High Street, Attn KIMVOG		FEC Identification Number C [REDACTED] <b>Transaction ID : B4B81A3BD8</b> Amount of Each Disbursement this Period [REDACTED] 100.83
City Columbus	State OH	Zip Code 43215-3406
Purpose of Disbursement Bank Fee		Category/ Type [REDACTED]
Candidate Name		
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Huntington National Bank</b>		Date of Disbursement MM / DD / YYYY 05 / 15 / 2017
Mailing Address 41 South High Street, Attn KIMVOG		FEC Identification Number C [REDACTED] <b>Transaction ID : B653ECFFF7I</b> Amount of Each Disbursement this Period [REDACTED] 100.67
City Columbus	State OH	Zip Code 43215-3406
Purpose of Disbursement Bank Fees		Category/ Type [REDACTED]
Candidate Name		
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Huntington National Bank</b>		Date of Disbursement MM / DD / YYYY 06 / 02 / 2017
Mailing Address 41 South High Street, Attn KIMVOG		FEC Identification Number C [REDACTED] <b>Transaction ID : BB1A07EF17</b> Amount of Each Disbursement this Period [REDACTED] 43.70
City Columbus	State OH	Zip Code 43215-3406
Purpose of Disbursement Merchant Fees		Category/ Type [REDACTED]
Candidate Name		
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:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 245.20
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)  
**Kasich for America, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Huntington National Bank</b>		Date of Disbursement MM / DD / YYYY 06 / 12 / 2017
Mailing Address 41 South High Street, Attn KIMVOG		FEC Identification Number C [REDACTED] <b>Transaction ID : B368FB4BC7</b>
City Columbus	State OH	Zip Code 43215-3406
Purpose of Disbursement Credit Card Payment		Amount of Each Disbursement this Period [REDACTED] 11270.22
Candidate Name		<input type="checkbox"/> Memo Item
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:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Bookpal</b>		Date of Disbursement MM / DD / YYYY 06 / 12 / 2017
Mailing Address 18101 Von Karman Ave Ste 120		FEC Identification Number C [REDACTED] <b>Transaction ID : BAB9D34987</b>
City Irvine	State CA	Zip Code 92612-0167
Purpose of Disbursement Book Purchase		Amount of Each Disbursement this Period [REDACTED] 11270.22
Candidate Name		<input checked="" type="checkbox"/> Memo Item
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:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. Huntington National Bank</b>		Date of Disbursement MM / DD / YYYY 06 / 15 / 2017
Mailing Address 41 South High Street, Attn KIMVOG		FEC Identification Number C [REDACTED] <b>Transaction ID : BBC1BD11F</b>
City Columbus	State OH	Zip Code 43215-3406
Purpose of Disbursement Bank Fees		Amount of Each Disbursement this Period [REDACTED] 102.02
Candidate Name		<input type="checkbox"/> Memo Item
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:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 11372.24
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)  
**Kasich for America, Inc.**

Full Name (Last, First, Middle Initial)

**A. Sermo Digital LLC**

Mailing Address 7605 SE 27th St  
Ste 204

City Mercer Island State WA Zip Code 98040-2835

Purpose of Disbursement  
Online/Web Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 27 / 2017

FEC Identification Number

C  
**Transaction ID : B6A37C457D**  
Amount of Each Disbursement this Period  
1277.85

Memo Item

Full Name (Last, First, Middle Initial)

**B. Sermo Digital LLC**

Mailing Address 7605 SE 27th St  
Ste 204

City Mercer Island State WA Zip Code 98040-2835

Purpose of Disbursement  
Email Service

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify)

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 13 / 2017

FEC Identification Number

C  
**Transaction ID : B070A0821FE**  
Amount of Each Disbursement this Period  
1485.02

Memo Item

Full Name (Last, First, Middle Initial)

**C. Sermo Digital LLC**

Mailing Address 7605 SE 27th St  
Ste 204

City Mercer Island State WA Zip Code 98040-2835

Purpose of Disbursement  
Voter Contact

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2017

FEC Identification Number

C  
**Transaction ID : B04CD4445A**  
Amount of Each Disbursement this Period  
1329.26

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

4092.13

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)  
**Kasich for America, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Sermo Digital LLC</b>		Date of Disbursement MM / DD / YYYY 04 / 06 / 2017
Mailing Address 7605 SE 27th St Ste 204		FEC Identification Number C [ ] <b>Transaction ID : B76ED92D43</b> Amount of Each Disbursement this Period 3722.47
City Mercer Island	State WA	Zip Code 98040-2835
Purpose of Disbursement Voter Contact		Category/ Type [ ]
Candidate Name		
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Sermo Digital LLC</b>		Date of Disbursement MM / DD / YYYY 05 / 11 / 2017
Mailing Address 7605 SE 27th St Ste 204		FEC Identification Number C [ ] <b>Transaction ID : BFA6752305C</b> Amount of Each Disbursement this Period 4437.97
City Mercer Island	State WA	Zip Code 98040-2835
Purpose of Disbursement EMAILS TO VOTERS		Category/ Type [ ]
Candidate Name		
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Sermo Digital LLC</b>		Date of Disbursement MM / DD / YYYY 06 / 06 / 2017
Mailing Address 7605 SE 27th St Ste 204		FEC Identification Number C [ ] <b>Transaction ID : BE19E43287</b> Amount of Each Disbursement this Period 3122.99
City Mercer Island	State WA	Zip Code 98040-2835
Purpose of Disbursement Email Marketing		Category/ Type [ ]
Candidate Name		
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:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	11283.43
<b>TOTAL</b> 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)  
**Kasich for America, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Stripe</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2017
Mailing Address 3180 18th St		FEC Identification Number C [REDACTED] <b>Transaction ID : B781307C56C</b> Amount of Each Disbursement this Period [REDACTED] 19.80
City San Francisco	State CA	Zip Code 94110-2043
Purpose of Disbursement Merchant Fee		Category/ Type [REDACTED]
Candidate Name		
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Stripe</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2017
Mailing Address 3180 18th St		FEC Identification Number C [REDACTED] <b>Transaction ID : B75DC08DA2</b> Amount of Each Disbursement this Period [REDACTED] 29.69
City San Francisco	State CA	Zip Code 94110-2043
Purpose of Disbursement Merchant Fees		Category/ Type [REDACTED]
Candidate Name		
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Stripe</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2017
Mailing Address 3180 18th St		FEC Identification Number C [REDACTED] <b>Transaction ID : BA26B88C1C</b> Amount of Each Disbursement this Period [REDACTED] 14.37
City San Francisco	State CA	Zip Code 94110-2043
Purpose of Disbursement Merchant Fee		Category/ Type [REDACTED]
Candidate Name		
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:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 63.86
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]



**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)  
**Kasich for America, Inc.**

Full Name (Last, First, Middle Initial)

**A. Stripe**

Mailing Address 3180 18th St

City San Francisco State CA Zip Code 94110-2043

Purpose of Disbursement  
Merchant Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 28 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : **BABAC99322**

Amount of Each Disbursement this Period

[REDACTED] 326.16

Memo Item

Full Name (Last, First, Middle Initial)

**B. Stripe**

Mailing Address 3180 18th St

City San Francisco State CA Zip Code 94110-2043

Purpose of Disbursement  
Merchant Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 30 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : **B47602D2497**

Amount of Each Disbursement this Period

[REDACTED] 65.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Stripe**

Mailing Address 3180 18th St

City San Francisco State CA Zip Code 94110-2043

Purpose of Disbursement  
Merchant Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 31 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : **B99E2877B0**

Amount of Each Disbursement this Period

[REDACTED] 1227.51

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

[REDACTED] 1618.67

[REDACTED]

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)  
**Kasich for America, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Stripe</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2017	
Mailing Address 3180 18th St		FEC Identification Number C [ ] <b>Transaction ID : BD23DFC338</b> Amount of Each Disbursement this Period [ ] 265.00	
City San Francisco	State CA	Zip Code 94110-2043	Category/ Type [ ]
Purpose of Disbursement Merchant Fees		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Stripe</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2017	
Mailing Address 3180 18th St		FEC Identification Number C [ ] <b>Transaction ID : B8C729C4D9I</b> Amount of Each Disbursement this Period [ ] 343.19	
City San Francisco	State CA	Zip Code 94110-2043	Category/ Type [ ]
Purpose of Disbursement Merchant Fees		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. WealthStone</b>		Date of Disbursement MM / DD / YYYY 01 / 27 / 2017	
Mailing Address 5000 Horizons Dr		FEC Identification Number C [ ] <b>Transaction ID : B4ED3FEC1I</b> Amount of Each Disbursement this Period [ ] 3128.00	
City Columbus	State OH	Zip Code 43220-5290	Category/ Type [ ]
Purpose of Disbursement Consulting		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 3736.19
<b>TOTAL</b> 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)  
**Kasich for America, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Winterset CPA Group, Inc.</b>		Date of Disbursement MM / DD / YYYY 01 / 27 / 2017	
Mailing Address 4679 Winterset Dr		FEC Identification Number C [REDACTED] <b>Transaction ID : BCA7EDFCC</b> Amount of Each Disbursement this Period 598.75	
City Columbus	State OH	Zip Code 43220-8113	Category/ Type
Purpose of Disbursement Consulting		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Winterset CPA Group, Inc.</b>		Date of Disbursement MM / DD / YYYY 02 / 13 / 2017	
Mailing Address 4679 Winterset Dr		FEC Identification Number C [REDACTED] <b>Transaction ID : B18DF3CA72</b> Amount of Each Disbursement this Period 429.90	
City Columbus	State OH	Zip Code 43220-8113	Category/ Type
Purpose of Disbursement Consulting		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Winterset CPA Group, Inc.</b>		Date of Disbursement MM / DD / YYYY 03 / 10 / 2017	
Mailing Address 4679 Winterset Dr		FEC Identification Number C [REDACTED] <b>Transaction ID : BBB258B51E</b> Amount of Each Disbursement this Period 1480.24	
City Columbus	State OH	Zip Code 43220-8113	Category/ Type
Purpose of Disbursement Accounting		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2508.89
<b>TOTAL</b> 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)  
**Kasich for America, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Winterset CPA Group, Inc.</b>		Date of Disbursement MM / DD / YYYY 03 / 24 / 2017	
Mailing Address 4679 Winterset Dr		FEC Identification Number C [REDACTED] <b>Transaction ID : BB9952DA38</b> Amount of Each Disbursement this Period [REDACTED] 908.75	
City Columbus	State OH	Zip Code 43220-8113	Category/ Type [REDACTED]
Purpose of Disbursement Accounting		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Winterset CPA Group, Inc.</b>		Date of Disbursement MM / DD / YYYY 05 / 30 / 2017	
Mailing Address 4679 Winterset Dr		FEC Identification Number C [REDACTED] <b>Transaction ID : B67855D569C</b> Amount of Each Disbursement this Period [REDACTED] 1131.25	
City Columbus	State OH	Zip Code 43220-8113	Category/ Type [REDACTED]
Purpose of Disbursement Accounting		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Winterset CPA Group, Inc.</b>		Date of Disbursement MM / DD / YYYY 06 / 27 / 2017	
Mailing Address 4679 Winterset Dr		FEC Identification Number C [REDACTED] <b>Transaction ID : B5723AFC9E</b> Amount of Each Disbursement this Period [REDACTED] 875.00	
City Columbus	State OH	Zip Code 43220-8113	Category/ Type [REDACTED]
Purpose of Disbursement Accounting		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 2915.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED] 75197.00

# 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"/> 26	<input type="checkbox"/> 27
<input checked="" 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)  
**Kasich for America, Inc.**

**A. Duffield, Grant, D., Mr.,**

Full Name (Last, First, Middle Initial)  
Date of Disbursement: 04 / 06 / 2017

Mailing Address 207 Orchard Lane

City Sewickley State PA Zip Code 15143-1150

Purpose of Disbursement 4/22/2016 Contribution refund  
FEC Identification Number: C  
Transaction ID : B1AF951747  
Amount of Each Disbursement this Period: 1000.00

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Memo Item

**B. Holzman, Karen, , Mrs.,**

Full Name (Last, First, Middle Initial)  
Date of Disbursement: 02 / 20 / 2017

Mailing Address 3305 S Moorings Way

City Miami State FL Zip Code 33133-6536

Purpose of Disbursement Reissue Lost refund check issued 6/1/2016  
FEC Identification Number: C  
Transaction ID : B0E51A4A73I  
Amount of Each Disbursement this Period: 2700.00

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Memo Item

**C. Holzman, Karen, , Mrs.,**

Full Name (Last, First, Middle Initial)  
Date of Disbursement: 02 / 20 / 2017

Mailing Address 3305 S Moorings Way

City Miami State FL Zip Code 33133-6536

Purpose of Disbursement Void Refund Check 2678 6/1/2016  
FEC Identification Number: C  
Transaction ID : B561FB7F56  
Amount of Each Disbursement this Period: - 2700.00

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

1000.00

**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"/> 26	<input type="checkbox"/> 27
<input checked="" 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)  
**Kasich for America, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Holzman, Steve, , Mr.,</b>		Date of Disbursement MM / DD / YYYY 02 / 20 / 2017	
Mailing Address 3305 S Moorings Way		FEC Identification Number C [ ] <b>Transaction ID : B7735EAAFC</b> Amount of Each Disbursement this Period [ ] - 2700.00	
City Miami	State FL	Zip Code 33133-6536	Category/ Type [ ]
Purpose of Disbursement Void Lost Refund Check 2665 6/1/2016		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Holzman, Steve, , Mr.,</b>		Date of Disbursement MM / DD / YYYY 02 / 20 / 2017	
Mailing Address 3305 S Moorings Way		FEC Identification Number C [ ] <b>Transaction ID : BA2107DEF6</b> Amount of Each Disbursement this Period [ ] 2700.00	
City Miami	State FL	Zip Code 33133-6536	Category/ Type [ ]
Purpose of Disbursement Reissue Refund check 2665 6/1/2016		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Vetter, Douglas, , Mr.,</b>		Date of Disbursement MM / DD / YYYY 02 / 20 / 2017	
Mailing Address 19303 Chablis Ct		FEC Identification Number C [ ] <b>Transaction ID : B4B59D831E</b> Amount of Each Disbursement this Period [ ] - 2700.00	
City Saratoga	State CA	Zip Code 95070-6103	Category/ Type [ ]
Purpose of Disbursement Void Lost Refund Check 2757 6/1/2016		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

[ ] - 2700.00
[ ]

**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"/> 26	<input type="checkbox"/> 27
<input checked="" 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)  
**Kasich for America, Inc.**

**A. Vetter, Douglas, , Mr.,**

Full Name (Last, First, Middle Initial)

Mailing Address 19303 Chablis Ct

City Saratoga State CA Zip Code 95070-6103

Purpose of Disbursement Reissue Lost Refund Check 2757 6/1/2016

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 02 / 20 / 2017

FEC Identification Number C

Transaction ID : B450AFDC51

Amount of Each Disbursement this Period 2700.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1000.00

**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"/> 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)  
**Kasich for America, Inc.**

**A. Boutin for State Senate**

Full Name (Last, First, Middle Initial)

Mailing Address 1465 Hooksett Rd  
Unit 80

City Hooksett State NH Zip Code 03106-1827

Purpose of Disbursement  
Non Federal Contribution made with permissible funds

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Category/Type

Date of Disbursement  
MM / DD / YYYY  
04 / 25 / 2017

FEC Identification Number  
C

Transaction ID : B0E15E97A8

Amount of Each Disbursement this Period  
1000.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Category/Type

Date of Disbursement  
MM / DD / YYYY

FEC Identification Number  
C

Amount of Each Disbursement this Period

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/Type

Date of Disbursement  
MM / DD / YYYY

FEC Identification Number  
C

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1000.00