

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. 12FE4M5
Jim Slone 4 Congress Committee

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

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

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on 11 / 06 / 2012 in the State of OH
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period 10 / 01 / 2012 through 10 / 17 / 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Argena Patouhas
Signature of Treasurer Argena Patouhas *[Electronically Filed]* Date 10 / 24 / 2012

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Jim Slone 4 Congress Committee

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	330.00	26410.70
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	330.00	26410.70
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	4082.89	22738.55
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	119.44
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	4082.89	22619.11
8. Cash on Hand at Close of Reporting Period (from Line 27).....	3762.72	
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).....	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Jim Slone 4 Congress Committee

Report Covering the Period: From: / / To: / /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	5215.00
(ii) Unitemized.....	330.00	9561.10
(iii) TOTAL of contributions from individuals ▶	330.00	14776.10
(b) Political Party Committees.....	0.00	600.00
(c) Other Political Committees (such as PACs).....	0.00	11034.60
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	330.00	26410.70
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	119.44
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	123.21	123.21
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	453.21	26653.35

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	4082.89	22738.55
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	152.08	152.08
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	4234.97	22890.63

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	7544.48
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	453.21
25. SUBTOTAL (add Line 23 and Line 24).....	7997.69
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	4234.97
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	3762.72

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 5 OF 6	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial) A. Chronicle Telegram Newspaper		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2012
Mailing Address 225 East Ave		Amount of Each Disbursement this Period 670.84 Transaction ID : SB17.4905
City Elyria	State OH	
Zip Code 44035	Purpose of Disbursement Newspaper Advertising	Category/ Type 004
Candidate Name Jim Slone 4 Congress Committee	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: OH District: 04	

Full Name (Last, First, Middle Initial) B. Creative Packaging Concepts		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2012
Mailing Address 214 Brace Ave		Amount of Each Disbursement this Period 1203.20 Transaction ID : SB17.4906
City Elyria	State OH	
Zip Code 44035	Purpose of Disbursement Printed poly bags for newspapers	Category/ Type 004
Candidate Name Jim Slone 4 Congress Committee	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: OH District: 04	

Full Name (Last, First, Middle Initial) c. Lake Screen Printing Inc		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2012
Mailing Address 1924 Broadway		Amount of Each Disbursement this Period 557.81 Transaction ID : SB17.4911
City Lorain	State OH	
Zip Code 44052	Purpose of Disbursement Yard Signs	Category/ Type 004
Candidate Name Jim Slone 4 Congress Committee	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: OH District: 04	

SUBTOTAL of Disbursements This Page (optional).....	2431.85
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 6			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial)		Date of Disbursement											
A. WOBL Radio		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>13</td> <td></td> <td>2012</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	10		13		2012
M M	/	D D	/	Y Y Y Y									
10		13		2012									
Mailing Address P O box 277		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Oberlin</td> <td>OH</td> <td>44074</td> </tr> </table>		City	State	Zip Code	Oberlin	OH	44074	<table border="1"> <tr> <td>1073.04</td> </tr> </table>		1073.04			
City	State	Zip Code											
Oberlin	OH	44074											
1073.04													
Purpose of Disbursement Radio Ads		Category/Type 004											
Candidate Name Jim Slone 4 Congress Committee		Transaction ID : SB17.4904											
Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: OH	District: 04												

Full Name (Last, First, Middle Initial)		Date of Disbursement											
B. WOBL Radio		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>17</td> <td></td> <td>2012</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	10		17		2012
M M	/	D D	/	Y Y Y Y									
10		17		2012									
Mailing Address P O box 277		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Oberlin</td> <td>OH</td> <td>44074</td> </tr> </table>		City	State	Zip Code	Oberlin	OH	44074	<table border="1"> <tr> <td>378.00</td> </tr> </table>		378.00			
City	State	Zip Code											
Oberlin	OH	44074											
378.00													
Purpose of Disbursement Radio Ads		Category/Type 004											
Candidate Name Jim Slone 4 Congress Committee		Transaction ID : SB17.4910											
Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: OH	District: 04												

Full Name (Last, First, Middle Initial)		Date of Disbursement											
C.		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		M M	/	D D	/	Y Y Y Y					
M M	/	D D	/	Y Y Y Y									
Mailing Address		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </table>		City	State	Zip Code				<table border="1"> <tr> <td></td> </tr> </table>					
City	State	Zip Code											
Purpose of Disbursement		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:												

SUBTOTAL of Disbursements This Page (optional).....	1451.04
TOTAL This Period (last page this line number only).....	3882.89