PAGE 1 / 27

FEC

REPORT OF RECEIPTS AND DISBURSEMENTS

FURIVI 3A	For	Other Than An A	uthorized	d Commit	tee		Office U	se Only	
NAME OF COMMITTEE (ii)		PE OR PRINT ▼		ample: If typer the lines.	oing, type	12FE	4M5		
ONWARD OF	lio	1 1 1 1 1 1							
ADDRESS (number a	fferent	679 WINTERSET DRIV	/E						
reported. (A	ACĆ)	COLUMBUS	CITY A			STATE A	43220	ZIP COD	DF A
C C006298			IS THIS REPORT	x	NEW (N) OR		AMENDED (A)		
July 15	eports: 5 rly Report (Q1)	Report Due On:	Feb 20 (M2) Mar 20 (M3) Apr 20 (M4)			Gen	Aug 20 (M8) Sep 20 (M9) Oct 20 (M10) eral (12G) cial (12S)		Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE)
Januar Year-E July 3 ⁻ Report Year C	rly Report (Q3)	(d) 30-Day POST-Election Report for the		General (36	/ D D /	Y	off (30R)	in the State of in the State of	Special (30S)
5. Covering Period	01	01 201	7	through	M M 06	30	20	17	
I certify that I have Type or Print Name	l	eport and to the best Lycan, Eric, D., ,	t of my kno	wledge and	belief it is tr	ue, correc	t and comple	te.	
Signature of Treasur	Lycan, Er	ic, D., ,		[Electronica	lly Filed]		M M / D	D /	2017
NOTE: Submission of	false, erroneous	, or incomplete informa	ation may sı	ubject the pe	erson signing	this Report	to the penalti	es of 52	U.S.C. § 30109
Office Use								FORI Rev. 05/20	

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016) Page 2 Write or Type Committee Name ONWARD OHIO 01 2017 06 30 2017 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 926798.95 January 1, 2017 (b) Cash on Hand at 926798.95 Beginning of Reporting Period..... 14300.00 14300.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 941098.95 941098.95 6(a) and 6(c) for Column B)..... 131623.74 131623.74 7. Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 809475.21 809475.21 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

ONWARD OHIO

		COLUMN B				
I. Receipts	I. Receipts COLUMN A Total This Period					
. Contributions (other than loans) From:						
(a) Individuals/Persons Other						
Than Political Committees	40050.00					
(i) Itemized (use Schedule A)	13050.00	13050.00				
(ii) Unitaminad	1250.00	1250.00				
(ii) Unitemized(iii) TOTAL (add	1230.00	1250.00				
Lines 11(a)(i) and (ii)	14300.00	14300.00				
E1103 11(a)(i) and (ii)	Apr. Apr. 1	49. 49.				
(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	44000.00	44200.00				
Totals to Line 33, page 5)	14300.00	14300.00				
. Transfers From Affiliated/Other	0.00	0.00				
Party Committees	0.00	0.00				
. All Loans Received	0.00	0.00				
. All Loans Neceived	45 45	4 4				
Loop Panaymenta Pagaiyad	0.00	0.00				
Loan Repayments Received Offsets To Operating Expenditures	0.00					
(Refunds, Rebates, etc.)						
(Carry Totals to Line 37, page 5)	0.00	0.00				
. Refunds of Contributions Made	4 4	7 7				
to Federal Candidates and Other						
Political Committees	0.00	0.00				
. Other Federal Receipts						
(Dividends, Interest, etc.)	0.00	0.00				
. Transfers from Non-Federal and Levin Funds		, , , , , , , , , , , , , , , , , , , ,				
(a) Non-Federal Account	0.00	0.00				
(from Schedule H3)	0.00	0.00				
	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				
(c) Total Transfers (add To(a) and To(b))	0.00	0.00				
. Total Receipts (add Lines 11(d),						
12, 13, 14, 15, 16, 17, and 18(c))▶	14300.00	14300.00				
_	7 7 7					
. Total Federal Receipts	1,000					
(subtract Line 18(c) from Line 19)▶	14300.00	14300.00				

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements		COLUMN A Total This Period	COLUMN B
	perating Expenditures:	iotal inis Period	Calendar Year-to-Date
(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)		121272 74	131273.74
(0)	Expenditures Total Operating Expenditures	131273.74	131273.74
(c)	(add 21(a)(i), (a)(ii), and (b))▶	131273.74	131273.74
Tra	ansfers to Affiliated/Other Party	7 7	
Co	ommittees	0.00	0.00
	ontributions to deral Candidates/Committees		
an	d Other Political Committees	0.00	0.00
	dependent Expenditures	0.00	0.00
Cc	se Schedule E)ordinated Party Expenditures	0.00	0.00
(52	2 U.S.C. § 30116(d)) se Schedule F)	0.00	0.00
,α,	20.3446 1 /	4 4	0.00
. Lo	an Repayments Made	0.00	0.00
		7 7 7	
Lo	ans Made	0.00	0.00
(a)	efunds of Contributions To: Individuals/Persons Other		
, ,	Than Political Committees	0.00	0.00
/I- \	Ballitad Bada Occasillada		
(b)	•	0.00	0.00
(c)	Other Political Committees (such as PACs)	0.00	0.00
(4)		0.00	0.00
(d)	(add Lines 28(a), (b), and (c))	0.00	0.00
	(add Lines 20(a), (b), and (c),	0.00	0.00
Ot	her Disbursements (Including		
	on-Federal Donations)	350.00	350.00
			4 4
	ederal Election Activity (52 U.S.C. § 30101(2	0))	
(a)	Allocated Federal Election Activity		
	(from Schedule H6) (i) Federal Share	0.00	0.00
	(i) I ederal Share	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
(b)		45 45 45	
	Entirely With Federal Funds	0.00	0.00
(c)	, ,	7 7 7	7 7 7
	Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
	'		
	tal Disbursements (add Lines 21(c), 22,		
23	, 24, 25, 26, 27, 28(d), 29 and 30(c))	131623.74	131623.74
To	tal Federal Disbursements	7 7 7	7 1 1 2
	ubtract Line 21(a)(ii) and Line 30(a)(ii)		
	om Line 31)	424692.74	
		131623.74	131623.74

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	14300.00	14300.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	14300.00	14300.00
3. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	131273.74	131273.74
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
3. Net Operating Expenditures (subtract Line 37 from Line 36)	131273.74	131273.74

SCHEDULE A (FEC Form 3X)

Use separate schedule(s)

FOF	R LINE	NUMBER	:	PAGE	6	OF	27
(che	eck only	one)					
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	13	14	□ 1	5	16		17

ITEMIZED RECEIPTS for each category of the Detailed Summary Page 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) ONWARD OHIO Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Belknap, David, S., , Date of Receipt Mailing Address 2301 N Orchard RE NE 18 2017 City Zip Code State Transaction ID: SA11AI.4327 OH **Bolivar** 44612 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Belknap Belknap & Briggs Chiro Chiropractor Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Bowen, Richard, L., , Date of Receipt Mailing Address 13000 Shaker Blvd 01 2017 City State Zip Code Transaction ID: SA11AI.4369 Cleveland OH 44120 Amount of Each Receipt this Period FEC ID number of contributing 7500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Richard L. Bowen & Associates President Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 7500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Cheatle, Jason, A., Date of Receipt Mailing Address 940 30th St NW 18 2017 City Zip Code State Transaction ID: SA11AI.4339 OH Massilon 44647 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Cheatle Chiropractic and Rehab Chiropractor Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify)

								900	0.00	\neg
SUBTOTAL of Receipts This Page (optional)		_		-		7	-	800	0.00	
FOTAL This Period (last page this line number only)					Т			Т		П
The Foliot (last page the line hallsor only)	_		7			7	÷	-	-	

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Use separate schedule(s)

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for each category of the Detailed Summary Page 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) ONWARD OHIO Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Davis, Todd, , , Date of Receipt Mailing Address 200 W Lincoln Way 18 2017 City Zip Code State Transaction ID: SA11AI.4311 OH Minerva 44657 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Chiropractor Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Dunn, Daryle, R.,, Date of Receipt Mailing Address 4160 Melton Ave 18 2017 City State Zip Code Transaction ID: SA11AI.4351 OH Arkron 44319 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Chiropractor Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Fedorko, Jeffrey, S., , Date of Receipt Mailing Address 7572 Arlington Ave NW 18 2017 City State Zip Code Transaction ID: SA11AI.4335 OH Massilon 44646 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Fedorko Chiropractic Center Chiropractor Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional).....

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

I	FOF	R LINE	NU	MBER	:	PAGE	8	OF	27
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		13		14		15	16	6	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) ONWARD OHIO Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Foughty, Joan, L.,, Date of Receipt Mailing Address 303 Fenchurch Circle NE 18 2017 City State Zip Code Transaction ID: SA11AI.4355 OH North Canton 44720 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Gloekler, Norman, J., , Date of Receipt Mailing Address 3170 Lake Road 01 18 2017 City State Zip Code Transaction ID: SA11AI.4333 OH 44030 Conneaut Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Gloekler Chiropractor Chiropractor Receipt For: Aggregate Year-to-Date ▼ Primary General

Other (specify) ▼		250.00	
Full Name of Individual (Last, First, Middle In Jajuga, Michael, P., , Mailing Address 10300 Herald Hwy	itial) or Full Orç	ganization Name	Date of Receipt O1 18 2017
City	State	Zip Code	Transaction ID : SA11AI.4309
Addison	MI	49220	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual)	Occup	pation (for Individual)	Memo Item
Foundation Chiropractic Clinic	Chiro	practor	
Receipt For: Primary General Other (specify)	Aggregate Y	/ear-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)			750.00

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

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

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-		LINE	PAGE	9	OF	27			
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		13		14		15	16	;	17

	Statements may not be sold or used by any pers ne name and address of any political committee to	
NAME OF COMMITTEE (In Full) ONWARD OHIO		
Full Name of Individual (Last, First, Middle In Knight, Susan, E., ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 6213 Rockside Circle NW		01 18 _ 2017 _
City Canton	State Zip Code OH 44718	Transaction ID : SA11AI.4365 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name of Individual (Last, First, Middle In Koinoglou, Nick, G., , Mailing Address 2794 Shillingford Cir NW	nitial) or Full Organization Name	Date of Receipt
City North Canton	State Zip Code OH 44720	01 18 2017 Transaction ID : SA11Al.4319 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer (for Individual) Family Health PhysicalMedicine	Occupation (for Individual) Chiropractor	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250,00	
Full Name of Individual (Last, First, Middle In Lyons, Chris, A., ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 8538 Ivy Hill Drive		01 18 2017
City Poland	State Zip Code OH 44514	Transaction ID : SA11AI.4363 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer (for Individual) Advanced Chiropractic and Reha	Occupation (for Individual) Chiropractor	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	>	750.00
TOTAL This Period (last page this line numbe	r only)	

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

FOR LINE NUMBER: PAGE (check only one) **X** 11a 11b 11c

27 10 OF Use separate schedule(s) for each category of the 12 Detailed Summary Page 13 14 15 16 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) ONWARD OHIO Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Novelli, Timothy, P.,, Date of Receipt Mailing Address 525 North Main St 18 2017 City Zip Code State Transaction ID: SA11AI.4345 OH North Canton 44720 Amount of Each Receipt this Period FEC ID number of contributing C 300.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Dr. Timothy Novelli North Cant Chiropractor Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Perduk, Ambrose, , , Jr. Date of Receipt Mailing Address 1013 Stone Crossing St NE 01 18 2017 City State Zip Code Transaction ID: SA11AI.4315 OH Canton 44721 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Ambrose, Perduck, DC Chiropractor Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Powell, James, D., , Date of Receipt Mailing Address 6088 Kinloch Court Cir NW 18 2017 City Zip Code State Transaction ID: SA11AI.4353 OH Massilon 44646 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Powell Chiropractic Center Chiropractor Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 800.00 SUBTOTAL of Receipts This Page (optional).....

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FOR LINE NUMBER: PAGE 11 OF Use separate schedule(s) (check only one) **X** 11a 11b 12 11c

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for each category of the Detailed Summary Page 13 14 15 16 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) ONWARD OHIO Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Schmidt, Otto, J,, Date of Receipt Mailing Address 2960 Whitacre Cir 18 2017 City Zip Code State Transaction ID: SA11AI.4308 OH Brecksville 44141 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Pleasant Valley Chiropractor Chiropractor Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Shiepis, George, , , Date of Receipt Mailing Address 2756 Cleveland Ave NW 01 18 2017 City State Zip Code Transaction ID: SA11AI.4325 OH Canton 44709 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Shiepis Clinic of Chiropractor Chiropractor Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Sprandel, Kim, D., , Date of Receipt Mailing Address 205 Samoa Dr 18 2017 City Zip Code State Transaction ID: SA11AI.4331 OH Akron 44319 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Sprandel Chiropractic Center Chiropractor Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

27 FOR LINE NUMBER: PAGE 12 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 12 11c Detailed Summary Page

13 14 15 16 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) ONWARD OHIO Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Thompson, Richard, , , Date of Receipt Mailing Address 551 S Grant Ave 18 2017 City Zip Code State Transaction ID: SA11AI.4361 OH Columbus 43206 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) German Village Chiropractors Chiropractor Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Tocco, Salvator, J.,, Date of Receipt Mailing Address 30972 Walden Dr 01 18 2017 City State Zip Code Transaction ID: SA11AI.4337 Westlake OH 44145 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Tocco Chiropractic and Rehabil Chiropractor Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Vargo, Ronald, , , Date of Receipt Mailing Address 2524 Spade Road 18 2017 City Zip Code State Transaction ID: SA11AI.4359 OH Uniontown 44685 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Bright and Vargo Chiropractor Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 13 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

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for each category of the Detailed Summary Page 13 14 15 16 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) ONWARD OHIO Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Yang, Charles, T.,, Date of Receipt Mailing Address 8537 Regency Dr NW 18 2017 City Zip Code State Transaction ID: SA11AI.4317 OH Massilon 44646 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Perry Chiropractic and Therapy Chiropractor Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Zaika, Jeff, , , Date of Receipt Mailing Address 1221 Hathaway Rd 01 18 2017 City State Zip Code Transaction ID: SA11AI.4329 OH Bellville 44813 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Jeffrey Zaika Chiropractor Chiropractor Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500.00 SUBTOTAL of Receipts This Page (optional)..... 13050.00 TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	for each o	rate schedule(s)	FOR LINE (check only					
	Detailed S	Summary Page	28a	28b 28c 29 30b				
Any information copied from such Reports and Statem or for commercial purposes, other than using the name								
NAME OF COMMITTEE (In Full) ONWARD OHIO	, who dudit	or any pointed	357777111111111111111111111111111111111	25.1.1.53.10.10 HOIT SUGIT COMMITTIES.				
Full Name (Last, First, Middle Initial) A. Barber, Holly, , ,				Date of Disbursement				
Mailing Address 6717 Dunheath Circle				03 07 2017				
Dublin	state OH	Zip Code 43016		FEC Identification Number				
Purpose of Disbursement Salary Candidate Name			001	Transaction ID : SB21B.4299 Amount of Each Dishusement this Period				
Office Sought: House Disbursem	nent For:		Category/ Type	Amount of Each Disbursement this Period 1687.70				
Senate President		Memo Item						
State: District:								
Full Name (Last, First, Middle Initial) B. DINSMORE & SHOHL LLP		Date of Disbursement						
Mailing Address PO BOX 639038			_	01 11 2017				
,	state OH	Zip Code 45263		FEC Identification Number				
Purpose of Disbursement Legal Services			001	C Transaction ID : SB21B.4266				
Candidate Name			Category/ Type	Amount of Each Disbursement this Period				
	Primary	General		3000.00				
State: District:	Other (spec	іту)		Memo Item				
Full Name (Last, First, Middle Initial) C. DINSMORE & SHOHL LLP				Date of Disbursement				
Mailing Address PO BOX 639038				02 03 7 2017				
CINCINNATI Purpose of Disbursement	State OH	Zip Code 45263		FEC Identification Number				
Legal Services Candidate Name			001 Category/ Type	Transaction ID : SB21B.4278 Amount of Each Disbursement this Period				
	nent For: Primary Other (spec	General	туре	3000.00				
State: District:		· · ·		Memo Item				
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only).				7687.70				

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use sepa for each of	NUMBER: PAGE 15 OF 27 one) 22 23 26 27		
		Summary Page	28a	28b 28c 29 30b
Any information copied from such Reports and Stater or for commercial purposes, other than using the nar				
NAME OF COMMITTEE (In Full) ONWARD OHIO	addi	pointou		
Full Name (Last, First, Middle Initial) A. DINSMORE & SHOHL LLP				Date of Disbursement
Mailing Address PO BOX 639038				03 07 2017
CINCINNATI	State OH	Zip Code 45263		FEC Identification Number
Purpose of Disbursement Legal Services Candidate Name			001	Transaction ID : SB21B.4296
Salidado Hallo			Category/ Type	Amount of Each Disbursement this Period
Senate President	ment For: Primary Other (spec	General (ify) ▼		3000.00 Memo Item
State: District:				ш
Full Name (Last, First, Middle Initial) B. DINSMORE & SHOHL LLP				Date of Disbursement
Mailing Address PO BOX 639038				05 18 2017
City :	State OH	Zip Code 45263		FEC Identification Number
Purpose of Disbursement Legal Services			001	C Transaction ID : SB21B.4252
Candidate Name			Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburser Senate President	ment For: Primary Other (spec	General		6000.00
State: District:		''' <i>y)</i>		Memo Item
Full Name (Last, First, Middle Initial) C. EUTON, BEATRICE, , ,				Date of Disbursement
Mailing Address 1255 CURVE ROAD				01 17 2017
City DELWARE Purpose of Disbursement Salary	State OH	Zip Code 43015		FEC Identification Number
Candidate Name			001 Category/ Type	Transaction ID: SB21B.4271 Amount of Each Disbursement this Period
Senate President	ment For: Primary Other (spec	General ify) ▼	.,,,,	20824.53 Memo Item
State: District:				
SUBTOTAL of Disbursements This Page (optional)			·····•	29824.53
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	FOR LINE (check only	one)
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NAME OF COMMITTEE (In Full) ONWARD OHIO				
Full Name (Last, First, Middle Initial) A. EUTON, BEATRICE, , ,				Date of Disbursement
Mailing Address 1255 CURVE ROAD				02 15 2017
DELWARE	State OH	Zip Code 43015		FEC Identification Number
Purpose of Disbursement Salary Candidate Name			001	Transaction ID : SB21B.4280
			Category/ Type	Amount of Each Disbursement this Period 9975.06
Office Sought: House Disburser Senate President	ment For: Primary Other (spec	General cify) ▼		Memo Item
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B. EUTON, BEATRICE, , ,				Date of Disbursement
Mailing Address 1255 CURVE ROAD				03 07 2017
DELWARE	State OH	Zip Code 43015		FEC Identification Number
Purpose of Disbursement Salary Candidate Name			001	Transaction ID : SB21B.4298
			Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburser Senate President	ment For: Primary Other (spec	General		6602.87 Memo Item
State: District: Full Name (Last, First, Middle Initial)				<u> </u>
C. Kohr Royer Griffith, Inc.				Date of Disbursement
Mailing Address 1450 Dublin Road				02 15 2017
Columbus	State OH	Zip Code 43215		FEC Identification Number
Purpose of Disbursement Deposit & rent Candidate Name			001 Category/ Type	Transaction ID : SB21B.4283 Amount of Each Disbursement this Period
Office Sought: House Disburser Senate	ment For: Primary	General	туре	4000.00
President State: District:	Other (spec	cify) ▼		Memo Item
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)				20577.93

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NAME OF COMMITTEE (In Full) ONWARD OHIO						
Full Name (Last, First, Middle Initial) A. Ohio College Republican Federatio	on		Date of Disbursement			
Mailing Address 211 S. Fifth Street			01 11 2017			
	State Zip Code OH 43216		FEC Identification Number			
Candidate Name		Category/	Transaction ID : SB21B.4263 Amount of Each Disbursement this Period			
	nent For: Primary General Other (specify)	Type	500.00 Memo Item			
Full Name (Last, First, Middle Initial) 3. OLSEN + COMPANY LP Mailing Address 1069 SHOAL CREEK BLVD			Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
AUSTIN	State Zip Code TX 78701		FEC Identification Number			
Purpose of Disbursement Consulting - Strategy Candidate Name		001 Category/ Type	Transaction ID: SB21B.4267 Amount of Each Disbursement this Period			
	nent For: Primary General Other (specify)	71.	3000.00 Memo Item			
Full Name (Last, First, Middle Initial) OLSEN + COMPANY LP			Date of Disbursement			
Mailing Address 1069 SHOAL CREEK BLVD STE 203			01 12 2017			
,	State Zip Code TX 78701	001	FEC Identification Number			
Candidate Name		Category/ Type	Transaction ID: SB21B.4268 Amount of Each Disbursement this Period			
	nent For: Primary General Other (specify) ▼		4460.34 Memo Item			
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS		rate schedule(s)	FOR LINE I	
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Full Name (Last, First, Middle Initial) A. OLSEN + COMPANY LP				Date of Disbursement
Mailing Address 1069 SHOAL CREEK BLVD STE 203				02 15 2017
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	ant Fam		Category/ Type	Amount of Each Disbursement this Period 3000.00
Senate President	nent For: Primary Other (spec	General cify) ▼		Memo Item
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Mailing Address 1069 SHOAL CREEK BLVD STE 203		,		03 08 2017
,	State TX	Zip Code 78701		FEC Identification Number
Consulting - Strategy Candidate Name			001 Category/ Type	Transaction ID : SB21B.4302 Amount of Each Disbursement this Period
	nent For: Primary Other (spec	General General	.,,,,	2357.14 Memo Item
Full Name (Last, First, Middle Initial) C. OLSEN + COMPANY LP				Date of Disbursement
Mailing Address 1069 SHOAL CREEK BLVD STE 203				03 08 2017
AUSTIN	State TX	Zip Code 78701		FEC Identification Number
Purpose of Disbursement Candidate Name			001 Category/ Type	Transaction ID: SB21B.4303 Amount of Each Disbursement this Period
	nent For: Primary Other (spec	General □	,,	7518.00 Memo Item
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SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)				12875.14

Any information copied from such Reports and Statements or for commercial purposes, other than using the name and NAME OF COMMITTEE (In Full) ONWARD OHIO Full Name (Last, First, Middle Initial) A. SHAFFER, GRANT, , , Mailing Address PO BOX 6012 City COLUMBUS Purpose of Disbursement Salary Candidate Name Office Sought: House Senate Disbursement F			
NAME OF COMMITTEE (In Full) ONWARD OHIO Full Name (Last, First, Middle Initial) A. SHAFFER, GRANT, , , Mailing Address PO BOX 6012 City COLUMBUS Purpose of Disbursement Salary Candidate Name Office Sought: House Primal Primal Other State: District: Full Name (Last, First, Middle Initial) B. SHAFFER, GRANT, , , Mailing Address PO BOX 6012 City COLUMBUS Furpose of Disbursement Senate Primal Other State: District: Full Name (Last, First, Middle Initial) B. SHAFFER, GRANT, , , Mailing Address PO BOX 6012 City COLUMBUS Purpose of Disbursement	address of any political		Date of Disbursement
NAME OF COMMITTEE (In Full) ONWARD OHIO Full Name (Last, First, Middle Initial) A. SHAFFER, GRANT, , , Mailing Address PO BOX 6012 City COLUMBUS Purpose of Disbursement Salary Candidate Name Office Sought: House Disbursement Primal President State: District: Full Name (Last, First, Middle Initial) B. SHAFFER, GRANT, , , Mailing Address PO BOX 6012 City COLUMBUS Purpose of Disbursement	Zip Code		Date of Disbursement
A. SHAFFER, GRANT, , , Mailing Address PO BOX 6012 City COLUMBUS Purpose of Disbursement Salary Candidate Name Office Sought: House Senate Primare President State: District: Full Name (Last, First, Middle Initial) SHAFFER, GRANT, , , Mailing Address PO BOX 6012 City COLUMBUS Purpose of Disbursement			M M / D D / Y Y Y Y
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COLUMBUS Purpose of Disbursement Salary Candidate Name Office Sought: House Senate Primal President Other State: District: Full Name (Last, First, Middle Initial) SHAFFER, GRANT, , , Mailing Address PO BOX 6012 City COLUMBUS Purpose of Disbursement			
Salary Candidate Name Office Sought: House Senate Primal Other State: District: Other State: District: SHAFFER, GRANT, , , Mailing Address PO BOX 6012 City COLUMBUS OH Purpose of Disbursement			FEC Identification Number
Senate President Other State: District: Full Name (Last, First, Middle Initial) SHAFFER, GRANT, , , Mailing Address PO BOX 6012 City COLUMBUS Purpose of Disbursement		001 Category/	Transaction ID : SB21B.4269 Amount of Each Disbursement this Period
President State: District: Full Name (Last, First, Middle Initial) 3. SHAFFER, GRANT, , , Mailing Address PO BOX 6012 City COLUMBUS Purpose of Disbursement		Type	7000.00
Full Name (Last, First, Middle Initial) B. SHAFFER, GRANT, , , Mailing Address PO BOX 6012 City COLUMBUS OH Purpose of Disbursement	ry ☐ General (specify) ▼		Memo Item
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	Zip Code 43206		FEC Identification Number
Candidata Nama		001	C Transaction ID : SB21B.4270
Candidate Name Office Sought: House Disbursement F	or.	Category/ Type	Amount of Each Disbursement this Period
Senate Primal President Other			Memo Item
State: District: Full Name (Last, First, Middle Initial) C- SHAFFER, GRANT, , ,			Date of Disbursement
Mailing Address PO BOX 6012			02 15 2017
City State COLUMBUS OH Purpose of Disbursement Salary	Zip Code 43206		FEC Identification Number
Candidate Name		001 Category/ Type	Transaction ID: SB21B.4279 Amount of Each Disbursement this Period
Office Sought: House Senate President State: Disbursement F Other		.,,,,,	3500.00 Memo Item
SUBTOTAL of Disbursements This Page (optional)			

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	DISBURSEMENTS Use separate so for each category				Lles separate schedule(s)				
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NAME OF COMMITTEE (In Full) ONWARD OHIO		, , , , , , , , , , , , , , , , , ,							
Full Name (Last, First, Middle Initial) SHAFFER, GRANT, , ,				Date of Disbursen					
Mailing Address PO BOX 6012				03 08					
COLUMBUS	State OH	Zip Code 43206		FEC Identification	Number				
Purpose of Disbursement Salary Candidate Name			001		D: SB21B.4301 Disbursement this Period				
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Full Name (Last, First, Middle Initial) SMITH, KATHERINE, , ,				Date of Disbursen					
Mailing Address 1265 ASHLAND AVENUE				01 18					
City COLUMBUS	State OH	Zip Code 43212		FEC Identification	Number				
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Full Name (Last, First, Middle Initial) SMITH, KATHERINE, , ,				Date of Disbursen					
Mailing Address 1265 ASHLAND AVENUE				02 / 15					
COLUMBUS Purpose of Disbursement	State OH	Zip Code 43212		FEC Identification	Number				
Consulting Candidate Name			001 Category/ Type	Transaction I	D: SB21B.4281 Disbursement this Period				
President	nent For: Primary Other (speci	General fy) ▼	1,700	Memo Item	1160.77				
State: District:									
SUBTOTAL of Disbursements This Page (optional)			·····•		5160.77				
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(Gricon Grilly	one)
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NAME OF COMMITTEE (In Full) ONWARD OHIO			
Full Name (Last, First, Middle Initial) SMITH, KATHERINE, , ,			Date of Disbursement
Mailing Address 1265 ASHLAND AVENUE			03 07 2017
COLUMBUS	State Zip Code OH 43212		FEC Identification Number
Purpose of Disbursement Consulting Candidate Name		001	Transaction ID : SB21B.4297
Office Sought: House Disbursem	nent For:	Category/ Type	Amount of Each Disbursement this Period 803.57
President	Primary General Other (specify) ▼		Memo Item
State: District: Full Name (Last, First, Middle Initial) B. UPSTREAM COMMUNICATIONS			Date of Disbursement
Mailing Address 1609 SHOAL CREEK BLVD STE 203			01
City S AUSTIN	State Zip Code TX 78701		FEC Identification Number
Purpose of Disbursement Candidate Name		004 Category/ Type	Transaction ID: SB21B.4273 Amount of Each Disbursement this Period
	nent For: Primary General Other (specify)	.,,,,	2126.23
State: District: Full Name (Last, First, Middle Initial)			Memo Item
C. UPSTREAM COMMUNICATIONS			Date of Disbursement
Mailing Address 1609 SHOAL CREEK BLVD STE 203			01 24 2017
,	State Zip Code TX 78701	004	FEC Identification Number
Candidate Name		004 Category/ Type	Transaction ID: SB21B.4275 Amount of Each Disbursement this Period
	nent For: Primary General Other (specify)		2327.68 Memo Item
SUBTOTAL of Disbursements This Page (optional)		>	5257.48

SCHEDULE B (FEC Form 3X)								E 22 OF 27
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NAME OF COMMITTEE (In Full)								
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A. UPSTREAM COMMUNICATIONS	,			Date	of Disbu	ırsem		YYYY
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Reimbursement - travel			004					
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Office Sought: House Disburse	ment For:			□ I .				14131.21
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President	Other (spe	ecify) 🔻		N N	/lemo Ite	m		
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Full Name (Last, First, Middle Initial) B. UPSTREAM COMMUNICATIONS	3			Date	of Disbu	rsem	ent	
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Mailing Address 1609 SHOAL CREEK BLVD STE 203				02		15		2017
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C. UPSTREAM COMMUNICATIONS	3				of Disbu			Y Y Y
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Purpose of Disbursement Consulting - Media			001		roncost	ion II) : SB21I	D 4206
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President	Other (spe	ecify) 🔻		N	/lemo Ite	m		
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NAME OF COMMITTEE (In Full)								
ONWARD OHIO								
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A. UPSTREAM COMMUNICATIONS	S 			Da	te of	Disburse		YYYY
Mailing Address 1609 SHOAL CREEK BLVD STE 203					02	1:	5	2017
City	State TX	Zip Code		FE	C Ide	ntification	Number	
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Reimbursement subscription			001					
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	ement For:							488.75
Senate	Primary	General						
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B. UPSTREAM COMMUNICATIONS	S			Da		Disburse		- Y - Y - Y
Mailing Address 1609 SHOAL CREEK BLVD STE 203					06		2	2017
City AUSTIN	State TX	Zip Code 78701		FE	C Ide	ntification	n Number	
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Full Name (Last, First, Middle Initial)								
C. UPSTREAM COMMUNICATIONS	S					Disburse		
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Purpose of Disbursement Expense reimbursement - travel			001		_		ID - CD04	ID 4050
Candidate Name			Category/ Type	An			ID: SB21 Disburser	ment this Period
Office Sought: House Disburs	ement For:		Type	$\dashv \Gamma$				2991.94
Senate	Primary	General				7	7	
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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 of 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) NAME OF COMMITTEE (in Full) Full Name (Last, First, Middle Initial) A. Wills, Matt, ., Mailing Address 3806 Dowltcher Lane City Columbus Purpose of Disbursement Reimbursement - mileage Candidate Name Office Sought: House Senate Primary General Pr							
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) ONWARD OHIO Full Name (Last, First, Middle Initial) A Wills, Matt, , ,	Any information conied from such Poports and Stat	omonte may	, not be sold or u				
Full Name (Last, First, Middle Initial) A. Wills, Matt., , Malling Address 3806 Dowitcher Lane City State							
Full Name (Last, First, Middle Initial) A. Wills, Matt, , ,	NAME OF COMMITTEE (In Full)						
A. Wills, Matt, , , Mailing Address 3806 Dowltcher Lane City	ONWARD OHIO						
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Mailing Address 3806 Dowltcher Lane City Columbus Purpose of Disbursement Reimbursement - mileage Candidate Name Office Sought:	A. Wills, Matt, , ,				Date o	_	
Columbus OH 43230 Furpose of Disbursement Reimbursement - mileage Candidate Name Office Sought: House Prisident Other (specify) ▼ Mailing Address 3806 Dowitcher Lane City Columbus Office Sought: House Prisident Reimbursement - mileage Category/ Type Office Sought: Add to Disbursement For: Prisident Prisident Reimbursement - mileage Candidate Name Office Sought: House Disbursement For: Senate Prisident Primary General Other (specify) Type Office Sought: House Disbursement For: Senate Primary General Primary General Disbursement This Period Other (specify) Mailing Address 4679 Winterset Drive City Other (specify) Satate Zip Code Other (specify) Type Office Sought: House Disbursement For: Senate Primary General Primary General Other (specify) Date of Disbursement Other (specify) Transaction ID: SB218.4285 Amount of Each Disbursement This Period Disbursement This Period Other (specify) Date of Disbursement Transaction ID: SB218.4285 Amount of Each Disbursement Other (specify) Transaction ID: SB218.4285 Amount of Each Disbursement Other (specify) Memo Item FEC Identification Number Category/ Type Date of Disbursement Transaction ID: SB218.4285 Amount of Each Disbursement Other (specify) Memo Item FEC Identification Number Category/ Type Date of Disbursement Transaction ID: SB218.4285 Amount of Each Disbursement Other (specify) Memo Item FEC Identification Number Category/ Transaction ID: SB218.4285 Amount of Each Disbursement Other (specify) Memo Item FEC Identification Number Category/ Transaction ID: SB218.4285 Amount of Each Disbursement Other (specify) Memo Item Substorial Category/ Transaction ID: SB218.4285 Amount of Each Disbursement Memo Item FEC Identification Number Category/ Transaction ID: SB218.4285 Amount of Each Disbursement Identification Number Category/ Transaction ID: SB218.4285 Amount of Each Disbursement Identification Number Category/ Type Office Sought: Memo Item FEC Identification Number Transaction ID: SB218.4285 Amount of Each Disbur	Mailing Address 3806 Dowitcher Lane				02		
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