

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**
Cincinnatus PAC

ADDRESS (number and street) 225 W Court St
Check if different than previously reported. (ACC) Cincinnati OH 45202

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00574228 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 11 / 03 / 2020 in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period 10 / 01 / 2020 through 10 / 14 / 2020

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

Signature of Treasurer *Callan, Sean, P.,* [Electronically Filed] Date 10 / 19 / 2020

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**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Cincinnatus PAC

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

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|---------------------------------------|---------------------------------------|
| 6. (a) Cash on Hand January 1, <input type="text" value="2020"/> | <input type="text" value="71048.45"/> | <input type="text" value="71048.45"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="26207.97"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="5000.00"/> | <input type="text" value="27500.00"/> |
| (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="31207.97"/> | <input type="text" value="98548.45"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="4864.13"/> | <input type="text" value="72204.61"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="26343.84"/> | <input type="text" value="26343.84"/> |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY 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

Cincinnatus PAC

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

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 5000.00 | 22250.00 |
| (ii) Unitemized | 0.00 | 250.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 5000.00 | 22500.00 |
| (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) | 5000.00 | 22500.00 |
| 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)..... | 0.00 | 0.00 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | 0.00 | 5000.00 |
| 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)).....▶ | 5000.00 | 27500.00 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶ | 5000.00 | 27500.00 |

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 | 2364.13 | 46354.61 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 2364.13 | 46354.61 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 0.00 | 5500.00 |
| 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 | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 0.00 | 0.00 |
| 29. Other Disbursements (Including Non-Federal Donations)..... | 2500.00 | 20350.00 |
| 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)) .. | 4864.13 | 72204.61 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 4864.13 | 72204.61 |

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

| III. Net Contributions/ Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|---------------------------------------|---|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 5000.00 | 22500.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 5000.00 | 22500.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 2364.13 | 46354.61 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 2364.13 | 46354.61 |

**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 6 OF 9 |
| | <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 |
|-----------------------------|-----------------------------|-----------------------------|

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)
Cincinnatus PAC

| | | | |
|---|--------------------|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Cioffi, Michael, , , | | | Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 02 / 2020 |
| Mailing Address 201 E 5th St #1700 | | | Transaction ID : SA11AI.6601 |
| City Cincinnati | State OH | Zip Code 45202 | Amount of Each Receipt this Period 5000.00 |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Memo Item Contribution | |
| Name of Employer (for Individual) Blank Rome | | Occupation (for Individual) Attorney | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 5000.00 | |

| | | | |
|---|-------|-----------------------------|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. | | | Date of Receipt M M / D D / Y Y Y Y Y Y |
| Mailing Address | | | Amount of Each Receipt this Period |
| City | State | Zip Code | <input type="checkbox"/> Memo Item |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer (for Individual) | | Occupation (for Individual) | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ | |

| | | | |
|---|-------|-----------------------------|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. | | | Date of Receipt M M / D D / Y Y Y Y Y Y |
| Mailing Address | | | Amount of Each Receipt this Period |
| City | State | Zip Code | <input type="checkbox"/> Memo Item |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer (for Individual) | | Occupation (for Individual) | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Aggregate Year-to-Date ▼ | |

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 5000.00 |
| TOTAL This Period (last page this line number only).....▶ | 5000.00 |

**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 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)
Cincinnati PAC

A. Manley Burke LPA

Full Name (Last, First, Middle Initial)

Mailing Address 225 W Court St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Legal fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 08 / 2020

FEC Identification Number: C

Transaction ID : SB21B.6614

Amount of Each Disbursement this Period: 500.00

Memo Item

B. Rivertown Strategies, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 224 E 8th St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Strategic consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 01 / 2020

FEC Identification Number: C

Transaction ID : SB21B.6605

Amount of Each Disbursement this Period: 1500.00

Memo Item

C. Taste of Belgium

Full Name (Last, First, Middle Initial)

Mailing Address 1135 Vine Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 06 / 2020

FEC Identification Number: C

Transaction ID : SB21B.6612

Amount of Each Disbursement this Period: 44.79

Memo Item

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 2044.79 |
| TOTAL This Period (last page this line number only).....▶ | 2044.79 |

**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)
Cincinnati PAC

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Bloom for Judge | | Date of Disbursement MM / DD / YYYY 10 / 01 / 2020 |
| Mailing Address 576 Grand Ave | | FEC Identification Number C [] Transaction ID : SB29.6604 Amount of Each Disbursement this Period [] 250.00 |
| City Cincinnati | State OH | Zip Code 45205 |
| Purpose of Disbursement Contribution | | 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. Charmaine McGuffey for Sheriff | | Date of Disbursement MM / DD / YYYY 10 / 14 / 2020 |
| Mailing Address 10510 Tangerhills Dr | | FEC Identification Number C [] Transaction ID : SB29.6616 Amount of Each Disbursement this Period [] 500.00 |
| City Cincinnati | State OH | Zip Code 45249 |
| Purpose of Disbursement Contribution | | 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) C. Friends of Aftab Pureval | | Date of Disbursement MM / DD / YYYY 10 / 05 / 2020 |
| Mailing Address 3415 Holly Ave | | FEC Identification Number C [] Transaction ID : SB29.6610 Amount of Each Disbursement this Period [] 500.00 |
| City Cincinnati | State OH | Zip Code 45208 |
| Purpose of Disbursement Contribution | | 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 | |

| | |
|--|-------------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | [] 1250.00 |
| 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 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)
Cincinnatus PAC

A. Friends of Driehaus

Full Name (Last, First, Middle Initial)

Mailing Address 417 McAlpin

City Cincinnati State OH Zip Code 45220

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|----|----|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 10 | | | 07 | | | 20 | 20 | | |

FEC Identification Number

C

Transaction ID : **SB29.6613**

Amount of Each Disbursement this Period

1000.00

Memo Item

B. Jenkins for Judge

Full Name (Last, First, Middle Initial)

Mailing Address 1335 Michigan Avenue

City Cincinnati State OH Zip Code 45208

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|----|----|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 10 | | | 01 | | | 20 | 20 | | |

FEC Identification Number

C

Transaction ID : **SB29.6602**

Amount of Each Disbursement this Period

250.00

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

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| | | | | | | | | | |

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

1250.00

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

2500.00