PAGE 1 / 15

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

			Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
MeToo Ohio			1
ADDRESS (number and street)	228 S. Washington St.		
▼ Check if different	Ste. 115		
than previously reported. (ACC)	Alexandria		VA 22314
2. FEC IDENTIFICATION	NUMBER ▼ CI	TY 🛦	STATE ▲ ZIP CODE ▲
C C00686865		S THIS NEW (N) OF	AMENDED (A)
4. TYPE OF REPORT (Choose One)	(b) Monthly Feb	0 20 (M2) May 20 (M	(Non-Election Year Only)
(a) Quarterly Reports:	Mai	r 20 (M3) Jun 20 (M6	(Non-Election Year Only)
April 15		20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
Quarterly Report July 15	(c) 12-Day	Primary (12P)	General (12G) Runoff (12R)
Quarterly Report	(Q2) PRE-Election Report for the:	Convention (12C)	Special (12S)
October 15 Quarterly Report	(Q3)		
January 31 Year-End Report	(YE) Election	on on	in the State of
July 31 Mid-Year Report (Non-elec Year Only) (MY)		✗ General (30G)	Runoff (30R) Special (30S)
Termination Repo	ort Election	on on 11 / 06	in the State of OH
5. Covering Period	10 18 2018	through 11	M / D D / Y Y Y Y Y Y Y Z Y Z Z 2018
I certify that I have examined		f my knowledge and belief it is	true, correct and complete.
Type or Print Name of Treasu	Lisker, Lisa, , , urer		
Signature of Treasurer	isker, Lisa, , ,	[Electronically Filed]	Date 12 / 06 / Y - Y - Y - Y - Y - Y - Y - Y - Y - Y
NOTE: Submission of false, err	oneous, or incomplete information	on may subject the person signing	g this Report to the penalties of 52 U.S.C. § 30109
Office Use			FEC FORM 3X Rev. 05/2016

MeToo Ohio

Write or Type Committee Name

Report Covering the Period:

(a) Cash on Hand

(b) Cash on Hand at

Cash on Hand at Close of

Debts and Obligations Owed TO the Committee (Itemize all on

10. Debts and Obligations Owed BY the Committee (Itemize all on

Schedule C and/or Schedule D)

Schedule C and/or Schedule D)

Reporting Period

7.

8.

January 1,

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 05/2016) Page 2 10 18 2018 11 26 2018 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date 0.00 2018 44000.00 Beginning of Reporting Period..... 425000.00 645000.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 645000.00 469000.00 6(a) and 6(c) for Column B)..... 442206.00 618206.00 Total Disbursements (from Line 31)...... 26794.00 26794.00 (subtract Line 7 from Line 6(d)).....

0.00

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		
<u> </u>		Page 3
10 18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	To:	11 26 2018
COLUMN A Total This Period		COLUMN B Calendar Year-to-Date
	10 18 2018 COLUMN A	10 18 2018 To:

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
. Contributions (other than loans) From: (a) Individuals/Persons Other				
Than Political Committees (i) Itemized (use Schedule A)	120000.00	340000.00		
(ii) Unitemized(iii) TOTAL (add	0.00	0.00		
Lines 11(a)(i) and (ii)	120000.00	340000.00		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees (such as PACs)(d) Total Contributions (add Lines	305000.00	305000.00		
11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) Transfers From Affiliated/Other	425000.00	645000.00		
Party Committees	0.00	0.00		
All Loans Received	0.00	0.00		
Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00		
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00		
to Federal Candidates and Other Political Committees	0.00	0.00		
Other Federal Receipts (Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds	0.00	0.00		
(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		
Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	425000.00	645000.00		
Total Federal Receipts (subtract Line 18(c) from Line 19)▶	425000.00	645000.00		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
Operating Expenditures: (a) Allocated Federal/Non-Federal				
Activity (from Schedule H4)	0.00	0.00		
(i) Federal Share	0.00	0.00		
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating				
Expenditures	35202.00	35202.00		
(c) Total Operating Expenditures	35202.00	35202.00		
(add 21(a)(i), (a)(ii), and (b))▶ Transfers to Affiliated/Other Party	35202.00	33202.00		
Committees	0.00	0.00		
Contributions to	4 4			
Federal Candidates/Committees and Other Political Committees	0.00	0.00		
Independent Expenditures		4 4		
(use Schedule E)	407004.00	583004.00		
Coordinated Party Expenditures (52 U.S.C. § 30116(d))				
(use Schedule F)	0.00	0.00		
Lance December 14 Martin				
Loan Repayments Made	0.00	0.00		
Loans Made	0.00	0.00		
Loans Made Refunds of Contributions To:	0.00	0.00		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00		
That I olded committee	0.00	0.00		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees	4 4 4			
(such as PACs)	0.00	0.00		
(d) Total Contribution Refunds		4 4		
(add Lines 28(a), (b), and (c))	0.00	0.00		
·	4 4	7 7		
Other Disbursements (Including				
Non-Federal Donations)	0.00	0.00		
Federal Election Activity (52 U.S.C. § 30101((20))			
(a) Allocated Federal Election Activity	(20))			
(from Schedule H6)				
(i) Federal Share	0.00	0.00		
	0.00	0.00		
(ii) "Levin" Share	0.00	0.00		
(b) Federal Election Activity Paid	7 7	7 7 7		
Entirely With Federal Funds	0.00	0.00		
(c) Total Federal Election Activity (add	4 4			
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00		
Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	442206.00	618206.00		
Total Fadaral Dichurasments	7 7 7			
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)				
from Line 31)				
nom Line or j	442206.00	618206.00		

DETAILED SUMMARY PAGE

of Disbursements

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)	425000.00	645000.00
1. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	425000.00	645000.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	35202.00	35202.00
. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
Net Operating Expenditures (subtract Line 37 from Line 36)	35202.00	35202.00

SCHEDULE A (FEC Form 3X)

Use separate schedule(s)

F	OR	LINE	NU	MBER	PAGE		6	OF		15	
(0	(check only one)										
	X	11a		11b		11c		12	2		
		13		14		15		16	6		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) MeToo Ohio Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Alexander, Anthony, J.,, Date of Receipt Mailing Address PO Box 1510 2018 19 City Zip Code State Transaction ID: SA11AI.4139 OH Akron 44309 Amount of Each Receipt this Period FEC ID number of contributing C 25000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Retired Retired Receipt For: Aggregate Year-to-Date ▼ Primary General 25000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. A Public Voice Inc. Date of Receipt Mailing Address 15094 Township Rd 403 10 19 2018 City State Zip Code Transaction ID: SA11AI.4161 OH Thornville 43076 Amount of Each Receipt this Period FEC ID number of contributing 95000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 315000.00 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) 120000.00 SUBTOTAL of Receipts This Page (optional)..... 120000.00 TOTAL This Period (last page this line number only).....

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	ull Name of Individual (Last, First, Middle Initial) OHIO FIRST PAC		Date of	Re	ceipt									
N	failing Address PO BOX 9891					M = M	/	19		/ Y	2018	Y		
C	ity	State	Z	Zip Code		Trans	acti	on ID	: S	A11C.41	56			
_	ARLINGTON	VA		Amount	of	Each	Red	ceipt this	Period					
	EC ID number of contributing ederal political committee.	C C00666750						7		7	25000.0	00		
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	Primary General Other (specify) ▼			25000.00										
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c	Sity	State Zip Code					Transaction ID : SA11C.4158							
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16	ederal political committee.	900												
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	Primary General Other (specify) ▼			175000.00										
			7											
	ull Name of Individual (Last, First, Middle Initial)	or Full O	rganiz	zation Name		Date of	Re	ceipt						
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C	city	State	7	Zip Code	\dashv		acti			A11C.41		_		
_	ARLINGTON	VA		22219		Amount	of	Each	Red	ceipt this	Period			
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	NAME OF COMMITTEE (In Full)								
	MeToo Ohio								
Α.	Full Name of Individual (Last, First, Middle Initia OHIO FIRST PAC	al) or Full C	Organization Name	Date of Receipt					
	Mailing Address PO BOX 9891			10 25 2018					
	City	State	Zip Code	Transaction ID : SA11C.4160					
	ARLINGTON	VA	22219	Amount of Each Receipt this Period					
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	federal political committee.	U .							
	Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item					
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	Primary General	00 0		1					
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ackslash	NAME OF COMMITTEE (In Full)											
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٨	Full Name (Last, First, Middle Initial)					Date of	Diob	uroon	nont			
Α.	Alice Stewart LLC						יטפוט					
	Mailing Address 601 Holland Lane, #1105					11		02	_	100	2018	Y
	,	State	Zip Code			FEC Id	entific	ation	Nun	nber		
	Alexandria Purpose of Disbursement	VA	22314				-	_	_		-	
	Strategic Consulting					C						
	Candidate Name			Categor	\/\				_	B21B.	.4143 ent this	Period
				Type	y/	Amount	. 01 L	uoii L	JI30U	-	-	-
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	Senate	Primary	General									
	State: District:	Other (spe	city) 🔻			Me	mo Ite	em				
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В.	,					Date of	Disb	ursen	nent			
	Alice Glewart LLG					M M / D D / Y Y Y Y						
	Mailing Address 601 Holland Lane, #1105					11	J L	20)	L	2018	
	011	21.1	T-: 0 1									
	City Alexandria	State VA	Zip Code 22314			FEC Identification Number						
	Purpose of Disbursement		_	C								
	Strategic Consulting		ш		nsact	ion I	D · S	B21B.	4147			
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	President	•										
	State: District:	· · ·	,			Me	mo Ite	em				
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	Mailing Address 1909 K St., NW					11	1 1	21	_		2018	
	City	State	Zip Code				ontifi -	o#! =	N1. ···			
	Washington	DC	20006			FEC Id	enullic	ation	num	iber		
	Purpose of Disbursement Bank Fees		·		\neg	C						
	Candidate Name						SB21B					
	Candidate Name	y/	Amount	t of Ea	ach [Disbu	rseme	ent this	Period			
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	Senate	Primary	4 4									
	President	Other (spe	Memo Item									
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17

Senate President District: Full Name (Last, First, Middle Initial) B. Hagan, Christina, , , Mailing Address 10418 Beeson St., NE City Alliance Purpose of Disbursement Strategic Consulting Candidate Name Office Sought: House Primary General Other (specify) Date of Disbursement FEC Identification Number Category/ Type Transaction ID: SB21B.4145 Amount of Each Disbursement this Office Sought: Full Name (Last, First, Middle Initial) C. Memo Item FEC Identification Number Category/ Type Transaction ID: SB21B.4145 Amount of Each Disbursement this Disbursement For: Full Name (Last, First, Middle Initial) C. Transaction ID: SB21B.4145 Amount of Each Disbursement this Date of Disbursement Memo Item FEC Identification Number FEC Identification Number Category/ Type Transaction ID: SB21B.4145 Amount of Each Disbursement this Transaction ID: SB21B.4145 Transaction ID: SB21B.4145 Amount of Each Disbursement this Transaction ID: SB21B.4145 Transaction ID: SB21B.4145 Amount of Each Disbursement this Transaction ID: SB21B.4145 Transaction ID: SB21B.4	26 27		NE NUMBER: PAGE 10 OF 15							I llog congrete cohodulo(a) I									
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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 contributors from such commitments of commercial purposes, other than using the name and address of any political committee to solicit contributions from such commitments. NAME OF COMMITTEE (In Full) MeToo Ohio Full Name (Last, First, Middle Initial) A. Communications Counsel Inc. Mailing Address 37 West Broad St., Sie. 325 City Columbus Office Sought: House	29 30h							 											
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such commit NAME OF COMMITTEE (In Full) MeToo Ohio Full Name (Last, First, Middle Initial) A. Communications Counsel Inc. Mailing Address 37 West Broad St., Ste. 325 City Columbus Purpose of Disbursement Strategic Consutting Candidate Name Office Sought: Fect Identification Number Category' Type Date of Disbursement Fect Identification Number Category' Type Date of Disbursement Fect Identification Number Category' Type Transaction ID: \$8218.4145 Amount of Each Disbursement Strategic Consutting Category' Type Category' Type Category' Type Transaction ID: \$8218.4145 Amount of Each Disbursement this Fect Identification Number Category' Type Transaction ID: \$8218.4145 Amount of Each Disbursement this Fect Identification Number Category' Type Transaction ID: \$8218.4145 Amount of Each Disbursement Fect Identification Number Category' Type Date of Disbursement Transaction ID: \$8218.4145 Amount of Each Disbursement this Fect Identification Number Category' Category' Type Date of Disbursement Transaction ID: \$8218.4145 Amount of Each Disbursement this Fect Identification Number Category' Type Date of Disbursement Transaction ID: \$8218.415 Amount of Each Disbursement this Category' Type Date of Disbursement Type Date of Disbursement			D1:22					by crit	old or us	no+ h	monto ma	to and Ctata	om such Donort	nind fro	v information ac-	Λ			
MeToo Ohio Full Name (Last, First, Middle Initial) A. Communications Counsel Inc. Mailing Address 37 West Broad St., Ste. 325 City State Zip Code Columbus OH 43215 Purpose of Disbursement Strategic Consulting Candidate Name Office Sought: House Disbursement For: Senate President Strategic Consulting City State: District: Senate President Strategic Consulting Full Name (Last, First, Middle Initial) B. Hagan, Christina, , , Mailing Address 10418 Beeson St., NE City Aliance OH 44601 Purpose of Disbursement Strategic Consulting Candidate Name Office Sought: House Disbursement For: Senate Primary General President Strategic Consulting Cardidate Name Category/ Type Transaction ID: SB218.4145 Amount of Each Disbursement this FEC Identification Number Category/ Type Transaction ID: SB218.4145 Amount of Each Disbursement this Disbursement this District: Primary General President Other (specify) Memo Item Fell Name (Last, First, Middle Initial) C. Category/ Type Transaction ID: SB218.4145 Amount of Each Disbursement this Disbursement this District: Primary General Prima																			
Full Name (Last, First, Middle Initial) A. Communications Counsel Inc. Mailing Address 37 West Broad St., Ste. 325 City Columbus Purpose of Disbursement Strategic Consutting Candidate Name Office Sought: Full Name (Last, First, Middle Initial) B. Hagan, Christina, , , Mailing Address 10418 Beeson St., NE City Category/ Category/ Category/ Category/ Type Date of Disbursement Fill Name (Last, First, Middle Initial) B. Hagan, Christina Candidate Name Category/ Type Office Sought: Date of Disbursement FeC Identification Number Category/ Type Category/ Category/ Type Condidate Name Category/ Category/ Category/ Type Condidate Name Category/ Category/ Category/ Type Condidate Name Category/ Category/ Category/ Type Condidate Name Condidate Name Category/ Category/ Type Category/ Type Condidate Name Category/ Type Condidate Name Category/ Type Condidate Name Category/ Type Condidate Name Category/				_									EE (In Full)	IMITTE	NAME OF COMM				
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A. Communications Counsel Inc. Mailing Address 37 West Broad St., Ste, 325 City Columbus Purpose of Disbursement Strategic Consulting Candidate Name Office Sought: House Senate Primary General Prosident Strate; Consulting Candidate Name Office Sought: State: District: Full Name (Last, First, Middle Initial) B. Hagan, Christina, , , Mailing Address 10418 Beeson St., NE City Alliance Purpose of Disbursement Strategic Consulting Candidate Name Office Sought: House Disbursement For: Senate Primary General Primary General Primary General Strate; District: Full Name (Last, First, Middle Initial) FEC Identification Number Category/ Type Transaction ID : SB218.4145 Amount of Each Disbursement this Category/ Type Transaction ID : SB218.4145 Amount of Each Disbursement this Date of Disbursement Fell Name (Last, First, Middle Initial) C. Category/ Type Transaction ID : SB218.4145 Amount of Each Disbursement this Date of Disbursement Fell Name (Last, First, Middle Initial) C. Category/ Type Transaction ID : SB218.4145 Amount of Each Disbursement this Date of Disbursement Category/ Type Transaction ID : SB218.4145 Amount of Each Disbursement this Date of Disbursement Category/ Type Transaction ID : SB218.4145 Amount of Each Disbursement this Date of Disbursement Category/ Type Transaction ID : SB218.4145 Amount of Each Disbursement this Date of Disbursement Category/ Type Transaction ID : SB218.4145 Amount of Each Disbursement this Date of Disbursement Category/ Type Transaction ID : SB218.4145 Amount of Each Disbursement this Date of Disbursement Category/ Type Transaction ID : SB218.4145 Amount of Each Disbursement this Date of Disbursement Category/ Type Transaction ID : SB218.4145 Amount of Each Disbursement Category/ Type Transaction ID : SB218.4145 Amount of Each Disbursement Category/ Type Transaction ID : SB218.4145 Amount of Each Disbursement Amount of Each Disbursement Category/ Type Transaction ID : SB218.4145 Amount of Each Disbursement Transaction ID : SB218.																$oxed{oxed}$			
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Candidate Name Category/ Type Office Sought: House Disbursement For:	WILLING!	ncauon Nu	CIIII	iue		FEC													
Office Sought: House Disbursement For:						C		Purpose of Disbursement											
Office Sought: House Disbursement For:															Candidate Name				
Office Sought: House Disbursement For:	Amount of Each Disbursement this Period														Candidate Name				
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President Other (specify) ▼ Memo Item		Item	emo	/ler	М	П				ecify)	Other (sp		President						
State: District:					J	Ш							rict:	Distr	State:				
45000			_	_	_		-	· <u></u>											
SUBTOTAL of Disbursements This Page (optional)	15000.00																		
TOTAL This Period (lest page this line number only)	15000.00	7			-	L	<u> </u>					e (optional)	ments This Page	sbursem	UBTOTAL of Disk	S			

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 11 OF
FOR LINE NUMBER:
(check only one)

:		
		9
	X	10

15

NAME OF COMMITTEE (In Full) MeToo Ohio A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): IE-Digital Media/Production-oppose Brown, Majority Strategies LLC Sherrod Mailing Address 12854 Kenan Dr. Ste. 145 City State Zip Code Jacksonville FL 32258 Transaction ID: SD10.4117 Outstanding Balance Beginning This Period 156004.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 156004.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Outstanding Balance at Close of This Period Payment This Period Amount Incurred This Period 0.00 1) SUBTOTALS This Period This Page (optional)..... 0.00 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TEMIZED INDEPENDENT EXPENDITURES				PAGE 12 OF 15 FOR LINE 24 OF FORM 3X			
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼			
MeToo Ohio				C C00686865			
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y = Y			
Full Name of Payee Majority Strategies LLC		☐ Memo	Item Da	ate of Public Distribution/Dissemination			
				10			
Mailing Address 12854 Kenan Dr.			An	nount			
Ste. 145	State	Zip Code	<u> —</u> г	75000.00			
Jacksonville	FL	32258		ansaction ID : SE.4127			
Purpose of Expenditure IE_Brown, Sherrod-Digital Ads		Category/ Type 004		ate of Disbursement or Obligation 11 02 2018			
Name of Federal Candidate:		Support	Office Sc	pught: House District: 00			
BROWN, SHERROD, , ,		Coppose Support		esident Senate State: OH			
Calendar Year-To-Date			Disburse	ment For: Primary X General			
Per Election for Office Sought	, ,	427000.00	2018	Other (specify) ▶			
Full Name of Payee Majority Strategies LLC		☐ Memo	Item Da	ate of Public Distribution/Dissemination			
. , .				09 24 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 12854 Kenan Dr.			An	nount			
Ste. 145	Ctoto	Zin Codo	— г	5000.00			
Jacksonville	State FL	Zip Code 32258		ransaction ID : SE.4150 ate of Disbursement or Obligation			
Purpose of Expenditure IE-Brown, Sherrod-Media Production Orig Disc 9/2	4/18	Category/ Type 004		Date of Disbursement of Obligation 11 02 2018			
Name of Federal Candidate:		Support	Office Sc	ought: House District: 00			
BROWN, SHERROD, , ,		x Oppose	Pre	esident Senate State: OH			
Calendar Year-To-Date Per Election for Office Sought	1 1 1	432000.00	Disbursei 2018	ment For:			
				Chief (opcony) v			
(a) SUBTOTAL of Itemized Independent Expenditures				80000.00			
(b) SUBTOTAL of Unitemized Independent Expenditure	res		. .				
(c) TOTAL Independent Expenditures			•				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized						
Lisker, Lisa, , ,	Electronically Fil	edl -	M M	/ D D / Y Y Y Y Y			
Signature		Date	e 12	06 2018			

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TEMIZED INDEPENDENT EXPENDITURES				PAGE 13 OF 15 FOR LINE 24 OF FORM 3X		
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼		
MeToo Ohio				C C00686865		
				O		
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y		
Full Name of Payee Majority Strategies LLC		☐ Memo	Item Date	e of Public Distribution/Dissemination		
Majority Strategies LLC				09 / 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 12854 Kenan Dr.			Amo	punt		
Ste. 145						
City	State	Zip Code	Ļ	6520.00		
Jacksonville	FL	32258		Transaction ID : SE.4151 Date of Disbursement or Obligation		
Purpose of Expenditure IE-Brown, Sherrod-Digital Ads-Orig Disc 9/13/2018		Category/ Type 004		11 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Name of Federal Candidate:		Support	Office Sou	ght: House District:00		
BROWN, SHERROD, , ,		x Oppose	Pres	ident Senate State: OH		
Calendar Year-To-Date			Disbursem	ent For: Primary X General		
Per Election for Office Sought	7	438520.00	2018	Other (specify) ▶		
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination		
Majority Strategies LLC				09 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 12854 Kenan Dr.				00 00 2010		
Ste. 145			Amo	punt		
City	State	Zip Code		2249.00		
Jacksonville	FL	32258		Transaction ID : SE.4152 Date of Disbursement or Obligation		
Purpose of Expenditure IE-Brown, Sherrod-Digital Ads-Orig Disc 9/6/2018		Category/		M M / D D / Y Y Y Y		
IL-Blown, Sherrou-Digital Aus-Ong Disc 9/0/2016		Type 004		11 02 2018		
Name of Federal Candidate:		Support	Office Sou	ght: House District: 00		
BROWN, SHERROD, , ,		x Oppose	Pres	ident Senate State: OH		
Calendar Year-To-Date		440769.00	Disbursem	ent For: Primary X General		
Per Election for Office Sought	7 7	440769.00	2018	Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures				8769.00		
(b) SUBTOTAL of Unitemized Independent Expenditure	es		· 			
()						
(c) TOTAL Independent Expenditures			• ∟			
Under penalty of perium I certify that the independent	ent expenditures	reported herein were	not made in	conneration consultation or concert		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.						
Lisker, Lisa, , ,	Electronically Fil	ed1	M = M	/ D D / Y Y Y Y Y		
Signature		Date	12	06 2018		

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TEMIZED INDEPENDENT EXPENDITURES				PAGE 14 OF 15 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
MeToo Ohio				C C00686865
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
Majority Strategies LLC				09 21 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 12854 Kenan Dr.			Amo	ount
Ste. 145	State	Zip Code		13235.00
Jacksonville	FL	32258		nsaction ID : SE.4153 e of Disbursement or Obligation
Purpose of Expenditure IE-Brown, Sherrod-Digital Ads-Orig Disc 9/21/2018		Category/ Type 004		11 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sou	aht: House District: 00
BROWN, SHERROD, , ,		▼ Oppose		ident Senate State: OH
Calendar Year-To-Date Per Election for Office Sought	T	454004.00	Disburseme 2018	ent For:
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
Majority Strategies LLC				10 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 12854 Kenan Dr.			Amo	ount
Ste. 145	State	Zip Code	$ \mid$ \vdash	97500.00
Jacksonville	FL	32258		Insaction ID : SE.4154 e of Disbursement or Obligation
Purpose of Expenditure IE-Brown, Sherrod-Digital Ads-Orig Disc 10/12/2018	3	Category/ Type 004		11 02 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sou	ght: House District: 00
BROWN, SHERROD, , ,		x Oppose	Pres	ident Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		551504.00	Disburseme 2018	ent For:
(a) SUBTOTAL of Itemized Independent Expenditures.			· • [110735.00
(b) SUBTOTAL of Unitemized Independent Expenditure	9S		, [
(c) TOTAL Independent Expenditures			· • [
Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidat party committee) any political party committee or its a	te or authorized			
Lisker, Lisa, , , [1	Electronically File	ed] Dots	M = M	06 2018
Signature		Date	e 12	2010

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TEMIZED INDEPENDENT EXPENDITURES				PAGE 15 OF 15 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
MeToo Ohio				C C00686865
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Days		□ Mana	Itarra D	ate of Public Distribution/Dissemination
Full Name of Payee Majority Strategies LLC		∐ Memo	item D	10 15 2018
Mailing Address 12854 Kenan Dr.			A	mount
Ste. 145	Otata	Zin Codo	r	24500.00
City	State	Zip Code		31500.00 ransaction ID : SE.4155
Jacksonville	FL	32258		ate of Disbursement or Obligation
Purpose of Expenditure IE-Brown, Sherrod-Media Prod/Media Buy-Orig Disc	: 10/15/18	Category/ Type 004		11 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office S	ought: House District:00
BROWN, SHERROD, , ,		x Oppose		esident X Senate State: OH
Calendar Year-To-Date		583004.00		ement For: Primary General
Per Election for Office Sought	7 7	000004.00	2018	Other (specify) ▶
Strategic Media Placement		☐ Memo	Item D	ate of Public Distribution/Dissemination
Mailing Address				10 24 2018
7669 Stagers Loop			A	mount
City	State	Zip Code		176000.00
Delaware	ОН	43015	I	Transaction ID : SE.4134 ate of Disbursement or Obligation
Purpose of Expenditure IE-Brown, Sherrod-Media Buy		Category/ Type 004		10 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office S	ought: House District:00
BROWN, SHERROD, , ,		Oppose	Pr	esident 🕱 Senate State: OH
Calendar Year-To-Date		352000.00	Disburse	ement For: Primary X General
Per Election for Office Sought	7 7		2010	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				207500.00
(b) SUBTOTAL of Unitemized Independent Expenditure	res		ьГ	• • • • • • • • • • • • • • • • • • • •
(c) TOTAL Independent Expenditures			•	407004.00
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Lisker, Lisa, , ,	Electronically File	ed]	m = M 12	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	<u> </u>	Date	7 12	2010