

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

CINCINNATI BELL INC FEDERAL 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="2015"/> | <input type="text" value="18381.35"/> | <input type="text" value="18381.35"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="20413.33"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="1663.14"/> | <input type="text" value="6345.12"/> |
| (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="22076.47"/> | <input type="text" value="24726.47"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="1800.00"/> | <input type="text" value="4450.00"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="20276.47"/> | <input type="text" value="20276.47"/> |
| 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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

CINCINNATI BELL INC FEDERAL PAC

Report Covering the Period: From: M M / D D / Y Y Y Y 05 / 01 / 2015 To: M M / D D / Y Y Y Y 05 / 31 / 2015

| 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)..... | 1198.80 | 2853.82 |
| (ii) Unitemized | 464.34 | 3491.30 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶ | 1663.14 | 6345.12 |
| (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) | 1663.14 | 6345.12 |
| 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 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 0.00 | 0.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3)..... | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfers (add 18(a) and 18(b)).. | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶ | 1663.14 | 6345.12 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶ | 1663.14 | 6345.12 |

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 | 0.00 | 0.00 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 0.00 | 0.00 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 1500.00 | 3000.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(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 | 300.00 | 1450.00 |
| 30. Federal Election Activity (2 U.S.C. §431(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)) .. | 1800.00 | 4450.00 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 1800.00 | 4450.00 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) | 1663.14 | 6345.12 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 1663.14 | 6345.12 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 0.00 | 0.00 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 0.00 | 0.00 |

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

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 6 OF 17 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <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)
CINCINNATI BELL INC FEDERAL PAC

A. LEIGH R FOX
Full Name (Last, First, Middle Initial)

Mailing Address 5690 CHESTNUT RIDGE DR

| | | |
|--------------------|-------------|-------------------|
| City CINCINNATI | State OH | Zip Code 45230 |
|--------------------|-------------|-------------------|

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

| | |
|--|---------------------------------------|
| Name of Employer CINCINNATI BELL INC. | Occupation CHIEF FINANCIAL OFFICER |
|--|---------------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **536.23**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | / | 02 | / | 2015 |

Transaction ID : B003893S000004L11A1

Amount of Each Receipt this Period

| |
|-------|
| 48.87 |
|-------|

PAYROLL DEDUCTION

B. LEIGH R FOX
Full Name (Last, First, Middle Initial)

Mailing Address 5690 CHESTNUT RIDGE DR

| | | |
|--------------------|-------------|-------------------|
| City CINCINNATI | State OH | Zip Code 45230 |
|--------------------|-------------|-------------------|

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

| | |
|--|---------------------------------------|
| Name of Employer CINCINNATI BELL INC. | Occupation CHIEF FINANCIAL OFFICER |
|--|---------------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **536.23**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | / | 16 | / | 2015 |

Transaction ID : B003894S000004L11A1

Amount of Each Receipt this Period

| |
|-------|
| 48.87 |
|-------|

PAYROLL DEDUCTION

C. LEIGH R FOX
Full Name (Last, First, Middle Initial)

Mailing Address 5690 CHESTNUT RIDGE DR

| | | |
|--------------------|-------------|-------------------|
| City CINCINNATI | State OH | Zip Code 45230 |
|--------------------|-------------|-------------------|

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

| | |
|--|---------------------------------------|
| Name of Employer CINCINNATI BELL INC. | Occupation CHIEF FINANCIAL OFFICER |
|--|---------------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **536.23**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | / | 30 | / | 2015 |

Transaction ID : B003898S000004L11A1

Amount of Each Receipt this Period

| |
|-------|
| 48.87 |
|-------|

PAYROLL DEDUCTION

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 146.61 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 7 OF 17 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
CINCINNATI BELL INC FEDERAL PAC

A. DONNA M HINKEL
Full Name (Last, First, Middle Initial)

Mailing Address 2400 PARRISH HILL LANE

City State Zip Code
CRESTVIEW HILLS KY 41017

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

Name of Employer Occupation
CINCINNATI BELL INC. DIRECTOR TRANSPORT NETWO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
202.23

Date of Receipt
MM / DD / YYYY
05 / 02 / 2015
Transaction ID : B003895S000007L11A1

Amount of Each Receipt this Period
13.91

PAYROLL DEDUCTION

B. DONNA M HINKEL
Full Name (Last, First, Middle Initial)

Mailing Address 2400 PARRISH HILL LANE

City State Zip Code
CRESTVIEW HILLS KY 41017

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

Name of Employer Occupation
CINCINNATI BELL INC. DIRECTOR TRANSPORT NETWO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
202.23

Date of Receipt
MM / DD / YYYY
05 / 16 / 2015
Transaction ID : B003896S000007L11A1

Amount of Each Receipt this Period
13.91

PAYROLL DEDUCTION

C. DONNA M HINKEL
Full Name (Last, First, Middle Initial)

Mailing Address 2400 PARRISH HILL LANE

City State Zip Code
CRESTVIEW HILLS KY 41017

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

Name of Employer Occupation
CINCINNATI BELL INC. DIRECTOR TRANSPORT NETWO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
202.23

Date of Receipt
MM / DD / YYYY
05 / 30 / 2015
Transaction ID : B003899S000007L11A1

Amount of Each Receipt this Period
13.91

PAYROLL DEDUCTION

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 41.73 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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

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NAME OF COMMITTEE (In Full)
CINCINNATI BELL INC FEDERAL PAC

A. JULIA M MCDANIEL
Full Name (Last, First, Middle Initial)

Mailing Address 4926 SUNDANCE DRIVE

City INDEPENDENCE State KY Zip Code 41051

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

Name of Employer CINCINNATI BELL INC. Occupation ENTERPRISE PROJECT MANAG

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 209.27

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2015
Transaction ID : B003895S000011L11A1

Amount of Each Receipt this Period
 19.09

PAYROLL DEDUCTION

B. JULIA M MCDANIEL
Full Name (Last, First, Middle Initial)

Mailing Address 4926 SUNDANCE DRIVE

City INDEPENDENCE State KY Zip Code 41051

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

Name of Employer CINCINNATI BELL INC. Occupation ENTERPRISE PROJECT MANAG

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 209.27

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2015
Transaction ID : B003896S000011L11A1

Amount of Each Receipt this Period
 19.09

PAYROLL DEDUCTION

C. JULIA M MCDANIEL
Full Name (Last, First, Middle Initial)

Mailing Address 4926 SUNDANCE DRIVE

City INDEPENDENCE State KY Zip Code 41051

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

Name of Employer CINCINNATI BELL INC. Occupation ENTERPRISE PROJECT MANAG

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 209.27

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2015
Transaction ID : B003899S000011L11A1

Amount of Each Receipt this Period
 19.09

PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 57.27

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

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

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

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NAME OF COMMITTEE (In Full)
CINCINNATI BELL INC FEDERAL PAC

A. KEVIN J MURRAY
Full Name (Last, First, Middle Initial)

Mailing Address 1322 MICHIGAN AVE

| | | |
|--------------------|-------------|-------------------|
| City CINCINNATI | State OH | Zip Code 45208 |
|--------------------|-------------|-------------------|

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

| | |
|--|---------------------------------------|
| Name of Employer CINCINNATI BELL INC. | Occupation SR VP/CIO, IT & NETWORK |
|--|---------------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | / | 02 | / | 2015 |

Transaction ID : B003895S000014L11A1

Amount of Each Receipt this Period

| |
|-------|
| 30.00 |
|-------|

PAYROLL DEDUCTION

B. KEVIN J MURRAY
Full Name (Last, First, Middle Initial)

Mailing Address 1322 MICHIGAN AVE

| | | |
|--------------------|-------------|-------------------|
| City CINCINNATI | State OH | Zip Code 45208 |
|--------------------|-------------|-------------------|

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

| | |
|--|---------------------------------------|
| Name of Employer CINCINNATI BELL INC. | Occupation SR VP/CIO, IT & NETWORK |
|--|---------------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | / | 16 | / | 2015 |

Transaction ID : B003896S000014L11A1

Amount of Each Receipt this Period

| |
|-------|
| 30.00 |
|-------|

PAYROLL DEDUCTION

C. KEVIN J MURRAY
Full Name (Last, First, Middle Initial)

Mailing Address 1322 MICHIGAN AVE

| | | |
|--------------------|-------------|-------------------|
| City CINCINNATI | State OH | Zip Code 45208 |
|--------------------|-------------|-------------------|

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

| | |
|--|---------------------------------------|
| Name of Employer CINCINNATI BELL INC. | Occupation SR VP/CIO, IT & NETWORK |
|--|---------------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | / | 30 | / | 2015 |

Transaction ID : B003899S000014L11A1

Amount of Each Receipt this Period

| |
|-------|
| 30.00 |
|-------|

PAYROLL DEDUCTION

| | |
|--|--------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 90.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 10 OF 17 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
CINCINNATI BELL INC FEDERAL PAC

A. CHRISTINA M NEISES
Full Name (Last, First, Middle Initial)
Mailing Address 11098 S. LICKING PIKE

| | | |
|--------------------|-------------|-------------------|
| City ALEXANDRIA | State KY | Zip Code 41001 |
|--------------------|-------------|-------------------|

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

| | |
|--|--|
| Name of Employer CINCINNATI BELL INC. | Occupation SR DIR-SVC MGMT & GOVERN |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **308.76**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | / | 02 | / | 2015 |

Transaction ID : B003895S000015L11A1

Amount of Each Receipt this Period

| |
|-------|
| 28.17 |
|-------|

PAYROLL DEDUCTION

B. CHRISTINA M NEISES
Full Name (Last, First, Middle Initial)
Mailing Address 11098 S. LICKING PIKE

| | | |
|--------------------|-------------|-------------------|
| City ALEXANDRIA | State KY | Zip Code 41001 |
|--------------------|-------------|-------------------|

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

| | |
|--|--|
| Name of Employer CINCINNATI BELL INC. | Occupation SR DIR-SVC MGMT & GOVERN |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **308.76**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | / | 16 | / | 2015 |

Transaction ID : B003896S000015L11A1

Amount of Each Receipt this Period

| |
|-------|
| 28.17 |
|-------|

PAYROLL DEDUCTION

C. CHRISTINA M NEISES
Full Name (Last, First, Middle Initial)
Mailing Address 11098 S. LICKING PIKE

| | | |
|--------------------|-------------|-------------------|
| City ALEXANDRIA | State KY | Zip Code 41001 |
|--------------------|-------------|-------------------|

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

| | |
|--|--|
| Name of Employer CINCINNATI BELL INC. | Occupation SR DIR-SVC MGMT & GOVERN |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **308.76**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | / | 30 | / | 2015 |

Transaction ID : B003899S000015L11A1

Amount of Each Receipt this Period

| |
|-------|
| 28.17 |
|-------|

PAYROLL DEDUCTION

| | |
|--|--------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 84.51 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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

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NAME OF COMMITTEE (In Full)
CINCINNATI BELL INC FEDERAL PAC

A. NEIL D OKONAK
Full Name (Last, First, Middle Initial)

Mailing Address 3623 ARCHER AVE

City CINCINNATI State OH Zip Code 45208

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

Name of Employer CINCINNATI BELL INC. Occupation SR DIR ENT PROG, PROC, L

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **363.32**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 02 / 2015

Transaction ID : B003895S000017L11A1

Amount of Each Receipt this Period
33.16

PAYROLL DEDUCTION

B. NEIL D OKONAK
Full Name (Last, First, Middle Initial)

Mailing Address 3623 ARCHER AVE

City CINCINNATI State OH Zip Code 45208

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

Name of Employer CINCINNATI BELL INC. Occupation SR DIR ENT PROG, PROC, L

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **363.32**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 16 / 2015

Transaction ID : B003896S000017L11A1

Amount of Each Receipt this Period
33.16

PAYROLL DEDUCTION

C. NEIL D OKONAK
Full Name (Last, First, Middle Initial)

Mailing Address 3623 ARCHER AVE

City CINCINNATI State OH Zip Code 45208

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

Name of Employer CINCINNATI BELL INC. Occupation SR DIR ENT PROG, PROC, L

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **363.32**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 30 / 2015

Transaction ID : B003899S000017L11A1

Amount of Each Receipt this Period
33.16

PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... **99.48**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
CINCINNATI BELL INC FEDERAL PAC

A. PATRICIA L RUPICH
Full Name (Last, First, Middle Initial)

Mailing Address 3439 CORNELL PLACE

| | | |
|--------------------|-------------|-------------------|
| City CINCINNATI | State OH | Zip Code 45220 |
|--------------------|-------------|-------------------|

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

| | |
|--|-----------------------------------|
| Name of Employer CINCINNATI BELL INC. | Occupation SR MGR - REGULATORY |
|--|-----------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **247.53**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 02 / 2015

Transaction ID : B003895S000022L11A1

Amount of Each Receipt this Period
22.56

PAYROLL DEDUCTION

B. PATRICIA L RUPICH
Full Name (Last, First, Middle Initial)

Mailing Address 3439 CORNELL PLACE

| | | |
|--------------------|-------------|-------------------|
| City CINCINNATI | State OH | Zip Code 45220 |
|--------------------|-------------|-------------------|

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

| | |
|--|-----------------------------------|
| Name of Employer CINCINNATI BELL INC. | Occupation SR MGR - REGULATORY |
|--|-----------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **247.53**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 16 / 2015

Transaction ID : B003896S000022L11A1

Amount of Each Receipt this Period
22.56

PAYROLL DEDUCTION

C. PATRICIA L RUPICH
Full Name (Last, First, Middle Initial)

Mailing Address 3439 CORNELL PLACE

| | | |
|--------------------|-------------|-------------------|
| City CINCINNATI | State OH | Zip Code 45220 |
|--------------------|-------------|-------------------|

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

| | |
|--|-----------------------------------|
| Name of Employer CINCINNATI BELL INC. | Occupation SR MGR - REGULATORY |
|--|-----------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **247.53**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 30 / 2015

Transaction ID : B003899S000022L11A1

Amount of Each Receipt this Period
22.56

PAYROLL DEDUCTION

| | |
|---|--------------|
| SUBTOTAL of Receipts This Page (optional)..... | 67.68 |
| TOTAL This Period (last page this line number only)..... | |

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

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

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NAME OF COMMITTEE (In Full)
CINCINNATI BELL INC FEDERAL PAC

A. THEODORE H TORBECK
 Full Name (Last, First, Middle Initial)
 Mailing Address 11225 RIVERSEDGE CT
 City LOVELAND State OH Zip Code 45140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CINCINNATI BELL INC. Occupation PRESIDENT & CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1269.18

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2015
Transaction ID : B003893S000005L11A1
 Amount of Each Receipt this Period
 115.38
 PAYROLL DEDUCTION

B. THEODORE H TORBECK
 Full Name (Last, First, Middle Initial)
 Mailing Address 11225 RIVERSEDGE CT
 City LOVELAND State OH Zip Code 45140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CINCINNATI BELL INC. Occupation PRESIDENT & CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1269.18

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2015
Transaction ID : B003894S000005L11A1
 Amount of Each Receipt this Period
 115.38
 PAYROLL DEDUCTION

C. THEODORE H TORBECK
 Full Name (Last, First, Middle Initial)
 Mailing Address 11225 RIVERSEDGE CT
 City LOVELAND State OH Zip Code 45140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CINCINNATI BELL INC. Occupation PRESIDENT & CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1269.18

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2015
Transaction ID : B003898S000005L11A1
 Amount of Each Receipt this Period
 115.38
 PAYROLL DEDUCTION

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 346.14 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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

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NAME OF COMMITTEE (In Full)
CINCINNATI BELL INC FEDERAL PAC

A. MICHAEL S VANDERWOUDE
Full Name (Last, First, Middle Initial)

Mailing Address 11243 GRANDON RIDGE CIR

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| MONTGOMERY | OH | 45249 |

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

| | |
|----------------------|--------------------------|
| Name of Employer | Occupation |
| CINCINNATI BELL INC. | SVP & GM CONSUMER MARKET |

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **423.06**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | / | 02 | / | 2015 |

Transaction ID : B003893S000006L11A1

Amount of Each Receipt this Period

| |
|-------|
| 38.46 |
|-------|

PAYROLL DEDUCTION

B. MICHAEL S VANDERWOUDE
Full Name (Last, First, Middle Initial)

Mailing Address 11243 GRANDON RIDGE CIR

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| MONTGOMERY | OH | 45249 |

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

| | |
|----------------------|--------------------------|
| Name of Employer | Occupation |
| CINCINNATI BELL INC. | SVP & GM CONSUMER MARKET |

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **423.06**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | / | 16 | / | 2015 |

Transaction ID : B003894S000006L11A1

Amount of Each Receipt this Period

| |
|-------|
| 38.46 |
|-------|

PAYROLL DEDUCTION

C. MICHAEL S VANDERWOUDE
Full Name (Last, First, Middle Initial)

Mailing Address 11243 GRANDON RIDGE CIR

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| MONTGOMERY | OH | 45249 |

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

| | |
|----------------------|--------------------------|
| Name of Employer | Occupation |
| CINCINNATI BELL INC. | SVP & GM CONSUMER MARKET |

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **423.06**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | / | 30 | / | 2015 |

Transaction ID : B003898S000006L11A1

Amount of Each Receipt this Period

| |
|-------|
| 38.46 |
|-------|

PAYROLL DEDUCTION

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 115.38 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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

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NAME OF COMMITTEE (In Full)
CINCINNATI BELL INC FEDERAL PAC

A. CHRISTOPHER J WILSON
Full Name (Last, First, Middle Initial)

Mailing Address 598 RIVERSHORE DRIVE

City HEBRON State KY Zip Code 41048

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

Name of Employer CINCINNATI BELL INC. Occupation VP & GENERAL COUNSEL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt 05 / 02 / 2015
Transaction ID : B003893S000008L11A1

Amount of Each Receipt this Period 50.00

PAYROLL DEDUCTION

B. CHRISTOPHER J WILSON
Full Name (Last, First, Middle Initial)

Mailing Address 598 RIVERSHORE DRIVE

City HEBRON State KY Zip Code 41048

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

Name of Employer CINCINNATI BELL INC. Occupation VP & GENERAL COUNSEL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt 05 / 16 / 2015
Transaction ID : B003894S000008L11A1

Amount of Each Receipt this Period 50.00

PAYROLL DEDUCTION

C. CHRISTOPHER J WILSON
Full Name (Last, First, Middle Initial)

Mailing Address 598 RIVERSHORE DRIVE

City HEBRON State KY Zip Code 41048

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

Name of Employer CINCINNATI BELL INC. Occupation VP & GENERAL COUNSEL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt 05 / 30 / 2015
Transaction ID : B003898S000008L11A1

Amount of Each Receipt this Period 50.00

PAYROLL DEDUCTION

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 150.00 |
| TOTAL This Period (last page this line number only)..... | 1198.80 |

**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 checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <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 BELL INC FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. BOEHNER FOR SPEAKER

Mailing Address 320 FIRST ST, SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
2016 PRIMARY ELECTION

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2015

Transaction ID : B003888S000001L23

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. TIM RYAN FOR CONGRESS

Mailing Address 337 VIENNA AVENUE
SUITE 1

City NILES State OH Zip Code 44446

Purpose of Disbursement
2016 PRIMARY ELECTION

011

Category/
Type

Candidate Name

TIMOTHY J RYAN

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: OH District: 13

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2015

Transaction ID : B003890S000001L23

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

1500.00

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

1500.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <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 BELL INC FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF JONATHAN DEVER

Mailing Address 632 VINE STREET
SUITE 805

City CINCINNATI State OH Zip Code 45202

Purpose of Disbursement
2016 PRIMARY ELECTION

Candidate Name
JONATHAN DEVER

Office Sought: House
 Senate
 President
State: OH District: 28

Disbursement For: 2016
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2015

Transaction ID : B003889S000001L29

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

B.

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 M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

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 M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

300.00

300.00