



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

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="2016"/>		<input type="text" value="16240.24"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="16240.24"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="28100.00"/>	<input type="text" value="28100.00"/>
(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="44340.24"/>	<input type="text" value="44340.24"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="30945.45"/>	<input type="text" value="30945.45"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="13394.79"/>	<input type="text" value="13394.79"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> 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)

Page 3

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).....	28100.00	28100.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	28100.00	28100.00
(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) .....	28100.00	28100.00
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	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))..... ▶	28100.00	28100.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	28100.00	28100.00

**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 .....	15445.45	15445.45
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	15445.45	15445.45
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	6000.00	6000.00
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 .....	9500.00	9500.00
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)) ..	30945.45	30945.45
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	30945.45	30945.45

**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) .....	28100.00	28100.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	28100.00	28100.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	15445.45	15445.45
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	15445.45	15445.45

**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 18
	(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)  
**Cincinnatus PAC**

**A. Frank Bardonaro**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2235 Riverside Drive  
 City Cincinnati State OH Zip Code 45202  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer O'Rourke Crain Company Occupation CEO  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **5000.00**

Date of Receipt **03 / 18 / 2016**  
**Transaction ID : SA11AI.4122**  
 Amount of Each Receipt this Period **5000.00**  
 Memo Item

**B. Daniel Gerrity**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 559 Gregory Lane  
 City Devon State PA Zip Code 19333  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Unemployed Occupation Unemployed  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1100.00**

Date of Receipt **01 / 21 / 2016**  
**Transaction ID : SA11AI.4104**  
 Amount of Each Receipt this Period **1100.00**  
 Memo Item

**C. Tiffany Heckler**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 435 W 51st Street  
 City Miami Beach State FL Zip Code 33140  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Unemployed Occupation Unemployed  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **2500.00**

Date of Receipt **01 / 05 / 2016**  
**Transaction ID : SA11AI.4102**  
 Amount of Each Receipt this Period **2500.00**  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... **8600.00**  
**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:	PAGE 7 OF 18
	(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

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

**A. Chris Jenkins**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1335 Michigan Avenue  
City Cincinnati State OH Zip Code 45208  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Minillo and Jenkins LPA Occupation Attorney  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **5000.00**

Date of Receipt **03 / 09 / 2016**  
**Transaction ID : SA11AI.4118**  
Amount of Each Receipt this Period **5000.00**  
 Memo Item

**B. Michael O'Rourke**  
Full Name (Last, First, Middle Initial)  
Mailing Address 370 Hawkins Ridge  
City Cincinnati State OH Zip Code 45230  
FEC ID number of contributing federal political committee. **C**  
Name of Employer VanderCar Holdings Occupation Executive  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **5000.00**

Date of Receipt **02 / 11 / 2016**  
**Transaction ID : SA11AI.4116**  
Amount of Each Receipt this Period **5000.00**  
 Memo Item

**C. Herbet Schutte**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3893 Eleazer Road  
City Xenia State OH Zip Code 45385  
FEC ID number of contributing federal political committee. **C**  
Name of Employer VanderCar Holdings Occupation Executive  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **1000.00**

Date of Receipt **02 / 10 / 2016**  
**Transaction ID : SA11AI.4109**  
Amount of Each Receipt this Period **1000.00**  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... **11000.00**  
**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 8 OF 18
	<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)  
**Cincinnatus PAC**

**A. Rob Smyjunas**  
Full Name (Last, First, Middle Initial)  
Mailing Address 9064 Ridgeway Close  
City Cincinnati State OH Zip Code 45236  
FEC ID number of contributing federal political committee. **C**  
Name of Employer VanderCar Holdings Occupation President  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **1000.00**

Date of Receipt **02 / 11 / 2016**  
**Transaction ID : SA11AI.4113**  
Amount of Each Receipt this Period **1000.00**  
 Memo Item

**B. Rob Smyjunas**  
Full Name (Last, First, Middle Initial)  
Mailing Address 9064 Ridgeway Close  
City Cincinnati State OH Zip Code 45236  
FEC ID number of contributing federal political committee. **C**  
Name of Employer VanderCar Holdings Occupation President  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **2000.00**

Date of Receipt **02 / 18 / 2016**  
**Transaction ID : SA11AI.4111**  
Amount of Each Receipt this Period **1000.00**  
 Memo Item

**C. Douglas Steinke**  
Full Name (Last, First, Middle Initial)  
Mailing Address 550 Folkerth Lane  
City Sidney State OH Zip Code 45365  
FEC ID number of contributing federal political committee. **C**  
Name of Employer VanderCar Holdings Occupation Executive  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **500.00**

Date of Receipt **02 / 12 / 2016**  
**Transaction ID : SA11AI.4106**  
Amount of Each Receipt this Period **500.00**  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... **2500.00**  
**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: PAGE 9 OF 18  
(check only one)

<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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)  
**A. Dwight Tillery**

Mailing Address 1724 Berkeley Avenue

City Cincinnati	State OH	Zip Code 45237
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FEC ID number of contributing federal political committee. **C**

Name of Employer Center for Closing the Health	Occupation CEO
---------------------------------------------------	-------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
03	/	16	/	2016

**Transaction ID : SA11AI.4120**

Amount of Each Receipt this Period  
5000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Matthew Ullman**

Mailing Address 9111 Springboro Pike

City Miamisburg	State OH	Zip Code 45342
--------------------	-------------	-------------------

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

Name of Employer VanderCar Holdings	Occupation Executive
----------------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
02	/	11	/	2016

**Transaction ID : SA11AI.4114**

Amount of Each Receipt this Period  
1000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C.**

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	28100.00

**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"/> 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 PAC**

Full Name (Last, First, Middle Initial)

**A. Josh Ahart**

Mailing Address 121 E Freedom Way

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
supply reimbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 11 / 2016

**Transaction ID : SB21B.4218**

Amount of Each Disbursement this Period

397.18

Memo Item

Full Name (Last, First, Middle Initial)

**B. Josh Ahart**

Mailing Address 121 E Freedom Way

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
supplies

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 22 / 2016

**Transaction ID : SB21B.4253**

Amount of Each Disbursement this Period

100.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Alfred Hotel**

Mailing Address 1201 Chestnut Street

City Philadelphia State PA Zip Code 19107

Purpose of Disbursement  
travel lodging

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 13 / 2016

**Transaction ID : SB21B.4177**

Amount of Each Disbursement this Period

736.31

Memo Item

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

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

1233.49

**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"/> 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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)

**A. Alfred Hotel**

Mailing Address 1201 Chestnut Street

City Philadelphia State PA Zip Code 19107

Purpose of Disbursement  
travel lodging

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 13 / 2016

Transaction ID : **SB21B.4179**

Amount of Each Disbursement this Period

736.31

Memo Item

Full Name (Last, First, Middle Initial)

**B. Crowne Plaza**

Mailing Address 33 E. Nationwide Boulevard

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
lodging

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 15 / 2016

Transaction ID : **SB21B.4221**

Amount of Each Disbursement this Period

204.45

Memo Item

Full Name (Last, First, Middle Initial)

**C. Crowne Plaza**

Mailing Address 33 E. Nationwide Boulevard

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
lodging

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 15 / 2016

Transaction ID : **SB21B.4223**

Amount of Each Disbursement this Period

267.45

Memo Item

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

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

1208.21

**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"/> 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 PAC**

Full Name (Last, First, Middle Initial)

**A. Manley Burke LPA**

Mailing Address 225 W Court Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
legal fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 08 / 2016

**Transaction ID : SB21B.4164**

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Manley Burke LPA**

Mailing Address 225 W Court Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
legal fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 04 / 2016

**Transaction ID : SB21B.4212**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Freeman McNeal**

Mailing Address 2236 Burnet Avenue

City Cincinnati State OH Zip Code 45219

Purpose of Disbursement  
staffing

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 22 / 2016

**Transaction ID : SB21B.4249**

Amount of Each Disbursement this Period

1500.00

Memo Item

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

3000.00

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Cincinnati PAC**

**A. Rivertown Strategies, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 224 E. 8th Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement supply reimbursement

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
02 / 18 / 2016

**Transaction ID : SB21B.4200**

Amount of Each Disbursement this Period: 539.00

Memo Item

**B. Rivertown Strategies, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 224 E. 8th Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement supply reimbursement

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
02 / 29 / 2016

**Transaction ID : SB21B.4208**

Amount of Each Disbursement this Period: 5809.31

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) ▼

Date of Disbursement: MM / DD / YYYY

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6348.31
<b>TOTAL</b> This Period (last page this line number only).....▶	11790.01

**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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)

**A. Calone for Congress**

Mailing Address P.O. Box 720

City East Setauket State NY Zip Code 11733

Purpose of Disbursement contribution

011

Candidate Name

**Calone for Congress**

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: NY District: 01

Date of Disbursement

MM / DD / YYYY  
01 / 05 / 2016

Transaction ID : **SB23.4124**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Hillary for America**

Mailing Address 35 E. Wacker Street

City Chicago State IL Zip Code 60601

Purpose of Disbursement contribution

011

Candidate Name

**Hillary for America**

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 10 / 2016

Transaction ID : **SB23.4126**

Amount of Each Disbursement this Period

2300.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Strickland for Senate**

Mailing Address P.O. Box 2196

City Columbus State OH Zip Code 43216

Purpose of Disbursement contribution

011

Candidate Name

**Strickland for Senate**

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: OH District:

Date of Disbursement

MM / DD / YYYY  
03 / 28 / 2016

Transaction ID : **SB23.4129**

Amount of Each Disbursement this Period

2700.00

Memo Item

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

6000.00

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

6000.00

**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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)

**A. Booth for Ohio**

Mailing Address 4444 Carver Woods Drive

City Cincinnati State OH Zip Code 45242

Purpose of Disbursement contribution

011

Candidate Name

**Booth for Ohio**

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 31 / 2016

Transaction ID : **SB29.4153**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Booth for Ohio**

Mailing Address 4444 Carver Woods Drive

City Cincinnati State OH Zip Code 45242

Purpose of Disbursement contribution

011

Candidate Name

**Booth for Ohio**

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 25 / 2016

Transaction ID : **SB29.4157**

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Citizens for Jake Zimmerman**

Mailing Address P.O. Box 50085

City St. Louis State MO Zip Code 63105

Purpose of Disbursement contribution

011

Candidate Name

**Citizens for Jake Zimmerman**

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 08 / 2016

Transaction ID : **SB29.4151**

Amount of Each Disbursement this Period

1500.00

Memo Item

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

4000.00

**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"/> 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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Driehaus for Commission</b>		Date of Disbursement MM / DD / YYYY 03 / 07 / 2016
Mailing Address 347 McAlpin Avenue		Transaction ID : <b>SB29.4158</b>  Amount of Each Disbursement this Period 250.00 <input type="checkbox"/> Memo Item
City Cincinnati	State OH	
Zip Code 45220	Category/Type <b>011</b>	
Purpose of Disbursement contribution		
Candidate Name <b>Driehaus for Commission</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Friends of Brigid Kelly</b>		Date of Disbursement MM / DD / YYYY 03 / 30 / 2016
Mailing Address 4353 Montgomery Road		Transaction ID : <b>SB29.4160</b>  Amount of Each Disbursement this Period 1500.00 <input type="checkbox"/> Memo Item
City Cincinnati	State OH	
Zip Code 45212	Category/Type <b>011</b>	
Purpose of Disbursement contribution		
Candidate Name <b>Friends of Brigid Kelly</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Garry for District 31</b>		Date of Disbursement MM / DD / YYYY 03 / 30 / 2016
Mailing Address 3662 State Route 125		Transaction ID : <b>SB29.4162</b>  Amount of Each Disbursement this Period 250.00 <input type="checkbox"/> Memo Item
City Bethel	State OH	
Zip Code 45106	Category/Type <b>011</b>	
Purpose of Disbursement contribution		
Candidate Name <b>Garry for District 31</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2000.00
<b>TOTAL</b> 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"/> 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 PAC**

Full Name (Last, First, Middle Initial)

**A. Ingram for the People**

Mailing Address 6571 Edwood Drive

City Cincinnati State OH Zip Code 45224

Purpose of Disbursement contribution

011

Candidate Name

**Ingram for the People**

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 16 / 2016

Transaction ID : SB29.4154

Amount of Each Disbursement this Period

250.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Ohio Democratic Party**

Mailing Address 340 E. Fulton Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement contribution

011

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 25 / 2016

Transaction ID : SB29.4156

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Portune for Ohio**

Mailing Address 7362 Bridgepoint Drive

City Cincinnati State OH Zip Code 45248

Purpose of Disbursement contribution

011

Candidate Name

**Portune for Ohio**

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 27 / 2016

Transaction ID : SB29.4152

Amount of Each Disbursement this Period

500.00

Memo Item

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

3250.00

**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"/> 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 PAC**

Full Name (Last, First, Middle Initial)

**A. Seth Walsh for Treasurer**

Mailing Address

City State Zip Code  
Cincinnati OH

Purpose of Disbursement  
contribution

011

Category/  
Type

Candidate Name

**Seth Walsh for Treasurer**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2016

**Transaction ID : SB29.4155**

Amount of Each Disbursement this Period

250.00

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

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 / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Memo Item

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 / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Memo Item

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

250.00

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

9500.00