



**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
OHIOS FUTURE PAC

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		84468.43
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	42853.97									
(c) Total Receipts (from Line 19) .....	10000.00	33500.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	52853.97	117968.43								
7. Total Disbursements (from Line 31) .....	32640.47	97754.93								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	20213.50	20213.50								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
OHIOS FUTURE PAC

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	5000.00	28500.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	5000.00	28500.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	5000.00	5000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	10000.00	33500.00
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 Transfer (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)) .....	10000.00	33500.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	10000.00	33500.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared 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.....	3390.47	20504.93
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	3390.47	20504.93
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	24500.00	49000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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.....	4750.00	28250.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	32640.47	97754.93
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	32640.47	97754.93

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 17

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) .....	10000.00	33500.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	10000.00	33500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	3390.47	20504.93
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	3390.47	20504.93

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 17

(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

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)  
OHIOS FUTURE PAC

**A.**

Full Name (Last, First, Middle Initial)  
William C Portman

Mailing Address 4310 Rossplain Drive

City State Zip Code  
Cincinnati OH 45236

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	7		2	0	1	0

Transaction ID: 01015.C432

Amount of Each Receipt this Period

	5000.00
--	---------

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">5000.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;">5000.00</span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 / 17
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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) OHIOS FUTURE PAC
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<b>A.</b>	Full Name (Last, First, Middle Initial) Honeywell International PAC	Date of Receipt
	Mailing Address 101 Constitution Ave., NW STE 500W C00096156	<input type="text" value="07"/> / <input type="text" value="03"/> / <input type="text" value="2010"/>
	City State Zip Code Washington DC 20001	<b>Transaction ID:</b> 01015.C433
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="5000.00"/>
	Name of Employer Occupation	Receipt
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="5000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="5000.00"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)  
OHIOS FUTURE PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) InFinTech</p> <p>Mailing Address 4010 Executive Park Drive Suite 300</p> <p>City Cincinnati State OH Zip Code 45241-</p> <p>Purpose of Disbursement Bankcard Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 01015.E747 <b>Date of Disbursement</b> 09 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><b>BANKCARD PROCESSING FEE</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) US Internal Revenue Service</p> <p>Mailing Address Department of Treasury</p> <p>City Cincinnati State OH Zip Code 45999-0005</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 01015.E742 <b>Date of Disbursement</b> 08 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 153.00</p> <p><b>PAYROLL TAXES</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Ohio Department of Job &amp; Family Svcs</p> <p>Mailing Address PO Box 182413</p> <p>City Columbus State OH Zip Code 43218-2413</p> <p>Purpose of Disbursement Unemployment Insurance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 01015.E749 <b>Date of Disbursement</b> 07 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 129.00</p> <p><b>UNEMPLOYMENT INSURANCE</b></p>

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

307.00

**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)  
OHIOS FUTURE PAC

A.	Full Name (Last, First, Middle Initial) Nancy R Aichholz	Transaction ID: 01014.E734 Date of Disbursement 08 / 15 / 2010
	Mailing Address 8405 Indian Hill Road	Amount of Each Disbursement this Period 911.63
	City Cincinnati State OH Zip Code 45243-	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	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) ▼
		PAYROLL

B.	Full Name (Last, First, Middle Initial) InFinTech	Transaction ID: 01015.E739 Date of Disbursement 08 / 30 / 2010
	Mailing Address 4010 Executive Park Drive Suite 300	Amount of Each Disbursement this Period 19.99
	City Cincinnati State OH Zip Code 45241-	
	Purpose of Disbursement Bankcard Processing Fee Candidate Name	Category/Type
	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) ▼
		BANKCARD PROCESSING FEE

C.	Full Name (Last, First, Middle Initial) InFinTech	Transaction ID: 01015.E738 Date of Disbursement 07 / 29 / 2010
	Mailing Address 4010 Executive Park Drive Suite 300	Amount of Each Disbursement this Period 19.99
	City Cincinnati State OH Zip Code 45241-	
	Purpose of Disbursement Bankcard Processing Fee Candidate Name	Category/Type
	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) ▼
		BANKCARD PROCESSING FEE

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	951.61
<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)

PAGE 10 / 17

<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)  
OHIOS FUTURE PAC

A.	Full Name (Last, First, Middle Initial) InFinTech	Transaction ID: 01015.E745 Date of Disbursement 07 / 02 / 2010
	Mailing Address 4010 Executive Park Drive Suite 300	Amount of Each Disbursement this Period 25.00
	City Cincinnati State OH Zip Code 45241-	
	Purpose of Disbursement Bankcard Processing Fee Candidate Name	Category/Type
	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) ▼
		BANKCARD PROCESSING FEE

B.	Full Name (Last, First, Middle Initial) InFinTech	Transaction ID: 01015.E740 Date of Disbursement 09 / 29 / 2010
	Mailing Address 4010 Executive Park Drive Suite 300	Amount of Each Disbursement this Period 19.99
	City Cincinnati State OH Zip Code 45241-	
	Purpose of Disbursement Bankcard Processing Fee Candidate Name	Category/Type
	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) ▼
		BANKCARD PROCESSING FEE

C.	Full Name (Last, First, Middle Initial) InFinTech	Transaction ID: 01015.E746 Date of Disbursement 08 / 03 / 2010
	Mailing Address 4010 Executive Park Drive Suite 300	Amount of Each Disbursement this Period 25.00
	City Cincinnati State OH Zip Code 45241-	
	Purpose of Disbursement Bankcard Processing Fee Candidate Name	Category/Type
	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) ▼
		BANKCARD PROCESSING FEE

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	69.99
<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 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)  
OHIOS FUTURE PAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Nancy R Aichholz</p> <p>Mailing Address 8405 Indian Hill Road</p> <p>City Cincinnati State OH Zip Code 45243-</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 01015.E743</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="911.63"/></p> <p><b>PAYROLL</b></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Nancy R Aichholz</p> <p>Mailing Address 8405 Indian Hill Road</p> <p>City Cincinnati State OH Zip Code 45243-</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 01015.E744</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="911.63"/></p> <p><b>PAYROLL</b></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) US Internal Revenue Service</p> <p>Mailing Address Department of Treasury</p> <p>City Cincinnati State OH Zip Code 45999-0005</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 01015.E741</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="153.00"/></p> <p><b>PAYROLL TAXES</b></p>

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

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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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)  
OHIOS FUTURE PAC

A.	Full Name (Last, First, Middle Initial) Steve Austria for Congress	Transaction ID: 01014.E736 Date of Disbursement 08 / 22 / 2010
	Mailing Address 2537 Obetz Drive	Amount of Each Disbursement this Period 2000.00
	City Beavercreek State OH Zip Code 45434-	
	Purpose of Disbursement CONTRIBUTION GEN OH 7	Category/Type
	Candidate Name STEVE C AUSTRIA	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 07	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		CONTRIBUTION GEN OH 7

B.	Full Name (Last, First, Middle Initial) Chabot for Congress	Transaction ID: 01014.E722 Date of Disbursement 08 / 22 / 2010
	Mailing Address 3341 Harrison Avenue	Amount of Each Disbursement this Period 2500.00
	City Cincinnati State OH Zip Code 45211-	
	Purpose of Disbursement CONTRIBUTION GEN OH 1	Category/Type
	Candidate Name STEVE CHABOT	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 01	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		CONTRIBUTION GEN OH 1

C.	Full Name (Last, First, Middle Initial) Ganley for Congress	Transaction ID: 01014.E719 Date of Disbursement 08 / 03 / 2010
	Mailing Address PO Box 41331	Amount of Each Disbursement this Period 2000.00
	City Brecksville State OH Zip Code 44141-0331	
	Purpose of Disbursement CONTRIBUTION GEN OH 13	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		CONTRIBUTION GEN OH 13

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	6500.00
<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 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)  
OHIOS FUTURE PAC

A.	Full Name (Last, First, Middle Initial) Gibbs for Congress  Mailing Address 211 S 5th St  City Columbus State OH Zip Code 43215-5203  Purpose of Disbursement CONTRIBUTION GEN OH 18  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 01014.E731 Date of Disbursement 08 / 22 / 2010  Amount of Each Disbursement this Period 2000.00  CONTRIBUTION GEN OH 18
B.	Full Name (Last, First, Middle Initial) Bill Johnson for Congress  Mailing Address 3755 Hunters HI  City Youngstown State OH Zip Code 44514-5308  Purpose of Disbursement CONTRIBUTION GEN OH 6  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 01014.E723 Date of Disbursement 08 / 13 / 2010  Amount of Each Disbursement this Period 2000.00  CONTRIBUTION GEN OH 6
C.	Full Name (Last, First, Middle Initial) Jim Jordan for Congress  Mailing Address 170 S State Route 560  City Urbana State OH Zip Code 43078-9026  Purpose of Disbursement CONTRIBUTION GEN OH 4  Candidate Name JAMES D JORDAN  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 04	Transaction ID: 01014.E725 Date of Disbursement 08 / 22 / 2010  Amount of Each Disbursement this Period 2000.00  CONTRIBUTION GEN OH 4

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

6000.00

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)

PAGE 15 / 17

<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)  
OHIOS FUTURE PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Schmidt for Congress <hr/> Mailing Address 771 Wards Corner Road <hr/> City Loveland State OH Zip Code 45140- <hr/> Purpose of Disbursement CONTRIBUTION GEN OH 2 <hr/> Candidate Name JEANNETTE H SCHMIDT <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 02 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 01014.E737 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 2 / 2 0 1 0	
	Amount of Each Disbursement this Period 2000.00	
	Category/ Type CONTRIBUTION GEN OH 2	
	Full Name (Last, First, Middle Initial) Tiberi for Congress <hr/> Mailing Address 2931 E Dublin Granville Rd Ste 190 Suite 190 <hr/> City Columbus State OH Zip Code 43231-2098 <hr/> Purpose of Disbursement CONTRIBUTION GEN OH 12 <hr/> Candidate Name PATRICK J TIBERI <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 12 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 01014.E728 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 2 / 2 0 1 0
Amount of Each Disbursement this Period 2000.00		
Category/ Type CONTRIBUTION GEN OH 12	Full Name (Last, First, Middle Initial) Citizens for Turner <hr/> Mailing Address 120 W 2nd St Ste 1510 <hr/> City Dayton State OH Zip Code 45402-1603 <hr/> Purpose of Disbursement CONTRIBUTION GEN OH 3 <hr/> Candidate Name MIKE TURNER <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 03 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 01014.E724 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 2 / 2 0 1 0
Amount of Each Disbursement this Period 2000.00		
Category/ Type CONTRIBUTION GEN OH 3		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	24500.00

**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)

PAGE 16 / 17

<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)  
OHIOS FUTURE PAC

A.	Full Name (Last, First, Middle Initial) Citizens to Elect Chris Widener	Transaction ID: 01015.E755 Date of Disbursement
	Mailing Address 23 South Center Street	<input type="text" value="09"/> <input type="text" value="03"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Springfield State OH Zip Code 45502-	Amount of Each Disbursement this Period
	Purpose of Disbursement NON-FEDERAL CONTRIBUTION	<input type="text" value="250.00"/>
	Candidate Name	Category/Type
	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.	Full Name (Last, First, Middle Initial) Justice Lanzinger Committee	Transaction ID: 01015.E752 Date of Disbursement
	Mailing Address 260 N Cassady Avenue	<input type="text" value="09"/> <input type="text" value="03"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Columbus State OH Zip Code 43209-	Amount of Each Disbursement this Period
	Purpose of Disbursement NON-FEDERAL CONTRIBUTION	<input type="text" value="250.00"/>
	Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Erlich For Governor	Transaction ID: 01014.E721 Date of Disbursement
	Mailing Address PO Box 2	<input type="text" value="07"/> <input type="text" value="25"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Timonium State MD Zip Code 21094-0002	Amount of Each Disbursement this Period
	Purpose of Disbursement NON-FEDERAL CONTRIBUTION	<input type="text" value="1000.00"/>
	Candidate Name	Category/Type
	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) .....	<input type="text" value="1500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

