

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

Checksmart Financial LLC Political Action Committee

ADDRESS (number and street)

 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|---|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input checked="" type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on / / in the State of

- (d) 30-Day POST-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on / / in the State of

5. Covering Period / / through / /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Bridgette Caryn Roman

Signature of Treasurer Bridgette Caryn Roman [Electronically Filed] Date / /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Checksmart Financial LLC Political Action Committee

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="2014"/>		186647.35
(b) Cash on Hand at Beginning of Reporting Period.....	168117.21	
(c) Total Receipts (from Line 19)	14208.68	95028.44
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	182325.89	281675.79
7. Total Disbursements (from Line 31).....	32250.00	131599.90
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	150075.89	150075.89
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY 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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Checksmart Financial LLC Political Action Committee

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).....	8807.68	83604.44
(ii) Unitemized	401.00	5424.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	9208.68	89028.44
(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)	9208.68	89028.44
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.....	5000.00	6000.00
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))..... ▶	14208.68	95028.44
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	14208.68	95028.44

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	299.90
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	299.90
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	15000.00	45250.00
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	17250.00	86050.00
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)) ..	32250.00	131599.90
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	32250.00	131599.90

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)	9208.68	89028.44
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9208.68	89028.44
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	299.90
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	299.90

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 32
	<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)
Checksmart Financial LLC Political Action Committee

A. Lisa Barber
Full Name (Last, First, Middle Initial)

Mailing Address 1345 S. Kolb Road
Apt 317

City Tuscon State AZ Zip Code 85710

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

Name of Employer Checksmart Financial LLC Occupation Auditor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt
10 / 15 / 2014
Transaction ID : SA11AI.6385

Amount of Each Receipt this Period
40.00

Payroll deduction of 20.00 per pay for two pay cycles

B. Josh T, Beatty
Full Name (Last, First, Middle Initial)

Mailing Address 7317 W. Montgomery Rd

City Peoria State AZ Zip Code 85383

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

Name of Employer Checksmart Financial LLC Occupation Regional Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **950.00**

Date of Receipt
10 / 15 / 2014
Transaction ID : SA11AI.6376

Amount of Each Receipt this Period
100.00

Payroll deduction of 50.00 per pay for two pay cycles

C. Timothy Bushman
Full Name (Last, First, Middle Initial)

Mailing Address 2014 NE 2nd Street

City Blue Springs State MO Zip Code 64014

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

Name of Employer Checksmart Financial LLC Occupation District Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt
10 / 15 / 2014
Transaction ID : SA11AI.6386

Amount of Each Receipt this Period
40.00

Payroll deduction of 20.00 per pay for two pay cycles

SUBTOTAL of Receipts This Page (optional)..... **180.00**

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 7 OF 32
	<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)
Checksmart Financial LLC Political Action Committee

A. William Chapman
Full Name (Last, First, Middle Initial)

Mailing Address 848 Gummer Court

City Reynoldsburg State OH Zip Code 43068

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

Name of Employer Checksmart Financial LLC Occupation Director of Loss Prevention

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **3800.00**

Date of Receipt **10 / 15 / 2014**

Transaction ID : SA11AI.6359

Amount of Each Receipt this Period **400.00**

Payroll deduction of 200.00 per pay for two pay cycles

B. Jason Creel
Full Name (Last, First, Middle Initial)

Mailing Address 620 Valley Street

City Hoover State AL Zip Code 35226

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

Name of Employer Checksmart Financial LLC Occupation District Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **3958.27**

Date of Receipt **10 / 15 / 2014**

Transaction ID : SA11AI.6354

Amount of Each Receipt this Period **416.66**

Payroll deduction of 208.33 per pay for two pay cycles

C. Eunice Cruz
Full Name (Last, First, Middle Initial)

Mailing Address 8030 W. Black Eagle Ct.

City Tucson State AZ Zip Code 85757

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

Name of Employer Checksmart Financial LLC Occupation District Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **570.00**

Date of Receipt **10 / 15 / 2014**

Transaction ID : SA11AI.6380

Amount of Each Receipt this Period **60.00**

Payroll deduction of 30.00 per pay for two pay cycles

SUBTOTAL of Receipts This Page (optional)..... **876.66**

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 32
	<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)
Checksmart Financial LLC Political Action Committee

A. Greyson Eves
Full Name (Last, First, Middle Initial)
Mailing Address 959 Turcotte Drive
City Gahanna State OH Zip Code 43203
FEC ID number of contributing federal political committee. **C**
Name of Employer Checksmart Financial LLC Occupation Vice President/Controller
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1800.00**

Date of Receipt **10 / 15 / 2014**
Transaction ID : SA11AI.6372
Amount of Each Receipt this Period **200.00**
Payroll deduction of 100.00 per pay for two pay cycles

B. Jennifer Fisher
Full Name (Last, First, Middle Initial)
Mailing Address 6000 Falling Rain Ct.
City Elk Grove State CA Zip Code 95757
FEC ID number of contributing federal political committee. **C**
Name of Employer Checksmart Financial LLC Occupation Regional Manager
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **3135.00**

Date of Receipt **10 / 15 / 2014**
Transaction ID : SA11AI.6367
Amount of Each Receipt this Period **330.00**
Payroll deduction of 165.00 per pay for two pay cycles

C. Amanda Fox
Full Name (Last, First, Middle Initial)
Mailing Address 5522 Westerville Crossing Drive
City Westerville State OH Zip Code 43081
FEC ID number of contributing federal political committee. **C**
Name of Employer Checksmart Financial LLC Occupation Director of Training
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1900.00**

Date of Receipt **10 / 15 / 2014**
Transaction ID : SA11AI.6373
Amount of Each Receipt this Period **200.00**
Payroll deduction of 100.00 per pay for two pay cycles

SUBTOTAL of Receipts This Page (optional)..... **730.00**
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 9 OF 32
<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)
Checksmart Financial LLC Political Action Committee

A. Rebecca Ryanne Fox
Full Name (Last, First, Middle Initial)

Mailing Address 485 87th Street #8

City Daly City	State CA	Zip Code 94015
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FEC ID number of contributing federal political committee. **C**

Name of Employer Checksmart Financial LLC	Occupation Regional Counsel
--	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2850.00

Date of Receipt
10 / 15 / 2014
Transaction ID : SA11AI.6368

Amount of Each Receipt this Period
300.00

Payroll deduction of 150.00 per pay for two pay cycles

B. Steven Fryer
Full Name (Last, First, Middle Initial)

Mailing Address 4690 Tuttle's Brook Drive

City Dublin	State OH	Zip Code 43016
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FEC ID number of contributing federal political committee. **C**

Name of Employer Checksmart Financial LLC	Occupation Director of Store Operations
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3958.27

Date of Receipt
10 / 15 / 2014
Transaction ID : SA11AI.6355

Amount of Each Receipt this Period
416.66

Payroll deduction of 208.33 per pay for two pay cycles

C. Robert Grenko
Full Name (Last, First, Middle Initial)

Mailing Address 3402 East Laurel Lane

City Phoenix	State AZ	Zip Code 85028
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FEC ID number of contributing federal political committee. **C**

Name of Employer Checksmart Financial LLC	Occupation Regional Vice President
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3800.00

Date of Receipt
10 / 15 / 2014
Transaction ID : SA11AI.6360

Amount of Each Receipt this Period
400.00

Payroll deduction of 200.00 per pay for two pay cycles

SUBTOTAL of Receipts This Page (optional).....▶	1116.66
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 32
<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)
Checksmart Financial LLC Political Action Committee

A. Robert Grieser
Full Name (Last, First, Middle Initial)

Mailing Address 6315 Moore Road

City Delaware	State OH	Zip Code 43015
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FEC ID number of contributing federal political committee. **C**

Name of Employer Checksmart Financial LLC	Occupation Vice President - Government Affairs
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3971.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2014

Transaction ID : SA11AI.6353

Amount of Each Receipt this Period
418.00

Payroll deduction of \$209 per pay-two payrolls

B. Robert Heitzman
Full Name (Last, First, Middle Initial)

Mailing Address 4331 Vista Walk Lane

City Powell	State OH	Zip Code 43065
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FEC ID number of contributing federal political committee. **C**

Name of Employer Checksmart Financial LLC	Occupation Director of Store Development
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2014

Transaction ID : SA11AI.6361

Amount of Each Receipt this Period
400.00

Payroll deduction of 200.00 per pay for two pay cycles

C. Pagle Helterbrand
Full Name (Last, First, Middle Initial)

Mailing Address 16469 Middleburg Plain City Road

City Marysville	State OH	Zip Code 43040
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FEC ID number of contributing federal political committee. **C**

Name of Employer Checksmart Financial LLC	Occupation Vice President of Human Resources
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2014

Transaction ID : SA11AI.6397

Amount of Each Receipt this Period
20.00

Payroll deduction of 10.00 per pay for two pay cycles

SUBTOTAL of Receipts This Page (optional).....▶	838.00
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 11 OF 32
	<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)
Checksmart Financial LLC Political Action Committee

A. Suzanne Hinson
Full Name (Last, First, Middle Initial)

Mailing Address 15807 Willowdale Road

City Tampa State FL Zip Code 33625

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

Name of Employer Checksmart Financial LLC Occupation District Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **285.00**

Date of Receipt **10 / 15 / 2014**

Transaction ID : SA11AI.6387

Amount of Each Receipt this Period **30.00**

Payroll deduction of 15.00 per pay for two pay cycles

B. Stacy Howler
Full Name (Last, First, Middle Initial)

Mailing Address 383 Coldwell Court

City Gahanna State OH Zip Code 43230

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

Name of Employer Checksmart Financial LLC Occupation Regional Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1900.00**

Date of Receipt **10 / 15 / 2014**

Transaction ID : SA11AI.6374

Amount of Each Receipt this Period **200.00**

Payroll deduction of 100.00 per pay for two pay cycles

C. Jon Ipp
Full Name (Last, First, Middle Initial)

Mailing Address 4950 S County Rd 300 E

City Liberty State IN Zip Code 47353

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

Name of Employer Checksmart Financial LLC Occupation Regional Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **3800.00**

Date of Receipt **10 / 15 / 2014**

Transaction ID : SA11AI.6362

Amount of Each Receipt this Period **400.00**

Payroll deduction of 208.33 per pay for two pay cycles

SUBTOTAL of Receipts This Page (optional)..... **630.00**

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 12 OF 32
	<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)
Checksmart Financial LLC Political Action Committee

A. Kevin I. Johnson
Full Name (Last, First, Middle Initial)
Mailing Address 7852 Larchwood Street
City State Zip Code
Dublin OH 43016
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Checksmart Financial LLC District Manager
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
475.00

Date of Receipt
10 / 15 / 2014
Transaction ID : SA11AI.6381
Amount of Each Receipt this Period
50.00
Payroll deduction of 25.00 per pay for two pay cycles

B. Chris Jones
Full Name (Last, First, Middle Initial)
Mailing Address 14932 Mercury Lane
City State Zip Code
Huntertown IN 46748
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Checksmart Financial LLC District Manager
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
475.00

Date of Receipt
10 / 15 / 2014
Transaction ID : SA11AI.6382
Amount of Each Receipt this Period
50.00
Payroll deduction of 25.00 per pay for two pay cycles

C. Eric Kirk
Full Name (Last, First, Middle Initial)
Mailing Address 1440 SouthWabash Avenue, #407
City State Zip Code
Chicago IL 60605
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Checksmart Financial LLC Regional Manager
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
3800.00

Date of Receipt
10 / 15 / 2014
Transaction ID : SA11AI.6363
Amount of Each Receipt this Period
400.00
Payroll deduction of 208.33 per pay for two pay cycles

SUBTOTAL of Receipts This Page (optional)..... **500.00**
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 13 OF 32
	<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)
Checksmart Financial LLC Political Action Committee

A. Richard D Lake
Full Name (Last, First, Middle Initial)
Mailing Address 4681 Fernway Drive
City North Port State FL Zip Code 34288
FEC ID number of contributing federal political committee. **C**
Name of Employer Checksmart Financial LLC Occupation Vice President of Store Development
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1900.00**

Date of Receipt **10 / 15 / 2014**
Transaction ID : SA11AI.6375
Amount of Each Receipt this Period **200.00**
Payroll deduction of 100.00 per pay for two pay cycles

B. Catherine Meyers
Full Name (Last, First, Middle Initial)
Mailing Address 2187 Ransom Oaks Drive
City Columbus State OH Zip Code 43228
FEC ID number of contributing federal political committee. **C**
Name of Employer Checksmart Financial LLC Occupation Controller/Director
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **855.00**

Date of Receipt **10 / 15 / 2014**
Transaction ID : SA11AI.6379
Amount of Each Receipt this Period **90.00**
Payroll deduction of 45.00 per pay for two pay cycles

C. Sally Mulkey
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 161
City Orient State OH Zip Code 43146
FEC ID number of contributing federal political committee. **C**
Name of Employer Checksmart Financial LLC Occupation Director of Internal Collections Op's
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **475.00**

Date of Receipt **10 / 15 / 2014**
Transaction ID : SA11AI.6383
Amount of Each Receipt this Period **50.00**
Payroll deduction of 25.00 per pay for two pay cycles

SUBTOTAL of Receipts This Page (optional)..... **340.00**
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 14 OF 32
	<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)
Checksmart Financial LLC Political Action Committee

A. Lou Nash
Full Name (Last, First, Middle Initial)
Mailing Address 7065 Stillwater Cove

City Westerville	State OH	Zip Code 43082
---------------------	-------------	-------------------

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

Name of Employer Checksmart Financial LLC	Occupation Chief Recovery Officer
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1967.36

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2014

Transaction ID : SA11AI.6371

Amount of Each Receipt this Period
213.04

Payroll deduction of 106.52 per pay for two pay cycles

B. Brian Nordmoe
Full Name (Last, First, Middle Initial)
Mailing Address 1647 Minturn Drive

City New Albany	State OH	Zip Code 43054
--------------------	-------------	-------------------

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

Name of Employer Checksmart Financial LLC	Occupation Accounting Department Manager
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
228.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2014

Transaction ID : SA11AI.6388

Amount of Each Receipt this Period
24.00

Payroll deduction of 12.00 per pay for two pay cycles

C. Lauren Probst
Full Name (Last, First, Middle Initial)
Mailing Address 9550 Shawnee Trail

City Powell	State OH	Zip Code 43065
----------------	-------------	-------------------

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

Name of Employer Checksmart Financial LLC	Occupation Director of Consumer Compliance
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2014

Transaction ID : SA11AI.6377

Amount of Each Receipt this Period
100.00

Payroll deduction of 50.00 per pay for two pay cycles

SUBTOTAL of Receipts This Page (optional).....	337.04
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 32
	<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)
Checksmart Financial LLC Political Action Committee

A. Larry Reisinger
Full Name (Last, First, Middle Initial)

Mailing Address 731 Steeplechase St.

City Delaware	State OH	Zip Code 43015
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FEC ID number of contributing federal political committee. **C**

Name of Employer Checksmart Financial LLC	Occupation Regional Vice President
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3800.00

Date of Receipt
10 / 15 / 2014
Transaction ID : SA11AI.6364

Amount of Each Receipt this Period
400.00

Payroll deduction of 200.00 per pay for two pay cycles

B. Bridgette Caryn Roman
Full Name (Last, First, Middle Initial)

Mailing Address 8825 Dunsinane Drive

City Dublin	State OH	Zip Code 43017
----------------	-------------	-------------------

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

Name of Employer Checksmart Financial LLC	Occupation General Counsel/Vice President
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3952.00

Date of Receipt
10 / 15 / 2014
Transaction ID : SA11AI.6358

Amount of Each Receipt this Period
416.00

Payroll deduction of 208.00 per pay for two pay cycles

C. John Rowe
Full Name (Last, First, Middle Initial)

Mailing Address 6130 Balmoral

City Dublin	State OH	Zip Code 43017
----------------	-------------	-------------------

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

Name of Employer Checksmart Financial LLC	Occupation Senior Vice President of Marketing
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2375.00

Date of Receipt
10 / 15 / 2014
Transaction ID : SA11AI.6369

Amount of Each Receipt this Period
250.00

Payroll deduction of 200.00 per pay for two pay cycles

SUBTOTAL of Receipts This Page (optional).....	1066.00
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 16 OF 32
	<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)
Checksmart Financial LLC Political Action Committee

A. Robert Rubestek
Full Name (Last, First, Middle Initial)

Mailing Address 1605 Clarence Avenue

City State Zip Code
Lakewood OH 44107

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

Name of Employer Occupation
Checksmart Financial LLC Regional Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2014

Transaction ID : SA11AI.6384

Amount of Each Receipt this Period
50.00

Payroll deduction of 25.00 per pay for two pay cycles

B. Christjahn Schnucker
Full Name (Last, First, Middle Initial)

Mailing Address 5719 Laura Lane

City State Zip Code
Hilliary OH 43026

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

Name of Employer Occupation
Checksmart Financial LLC Sr. VP Risk Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2014

Transaction ID : SA11AI.6366

Amount of Each Receipt this Period
600.00

Payroll deduction of 300.00 per pay for two pay cycles

C. Lance D. Solomon
Full Name (Last, First, Middle Initial)

Mailing Address 2847 Lochgreen Way

City State Zip Code
Dublin CA 94568

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

Name of Employer Occupation
Checksmart Financial LLC Vice President- Special Projects

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3958.27

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2014

Transaction ID : SA11AI.6356

Amount of Each Receipt this Period
416.66

Payroll deduction of 208.33 per pay for two pay cycles

SUBTOTAL of Receipts This Page (optional).....▶	1066.66
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 17 OF 32
	<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)
Checksmart Financial LLC Political Action Committee

A. Enrico Torres
Full Name (Last, First, Middle Initial)

Mailing Address 3580 Ballantree Place

City State Zip Code
Dublin OH 43016

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

Name of Employer Occupation
Checksmart Financial LLC Director of Store Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3958.27

Date of Receipt
10 / 15 / 2014
Transaction ID : SA11AI.6357

Amount of Each Receipt this Period
416.66

Payroll deduction of 208.33 per pay for two pay cycles

B. Lisa Vittorini
Full Name (Last, First, Middle Initial)

Mailing Address 4248 Vista Walk Lane

City State Zip Code
Powell OH 43065

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

Name of Employer Occupation
Checksmart Financial LLC Director of Compliance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3800.00

Date of Receipt
10 / 15 / 2014
Transaction ID : SA11AI.6365

Amount of Each Receipt this Period
400.00

Payroll deduction of 200.00 per pay for two pay cycles

C. Timothy Winslow
Full Name (Last, First, Middle Initial)

Mailing Address 3127 Stouenburgh Dr

City State Zip Code
Hilliard OH 43026

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

Name of Employer Occupation
Checksmart Financial LLC Ass't General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt
10 / 15 / 2014
Transaction ID : SA11AI.6378

Amount of Each Receipt this Period
100.00

Payroll deduction of 50.00 per pay for two pay cycles

SUBTOTAL of Receipts This Page (optional).....▶	916.66
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 18 OF 32
	<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)
Checksmart Financial LLC Political Action Committee

A. Full Name (Last, First, Middle Initial)
Jerome Zingg

Mailing Address 4670 Pine Tree Court

City Westerville	State OH	Zip Code 43082
---------------------	-------------	-------------------

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

Name of Employer Checksmart Financial LLC	Occupation Senior VP Management Information Sys
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1990.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2014
Transaction ID : SA11AI.6370

Amount of Each Receipt this Period
210.00

Payroll deduction of 105.00 per pay for two pay cycles

B. Full Name (Last, First, Middle Initial)

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 Y Y

Amount of Each Receipt this Period

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

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 Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	210.00
TOTAL This Period (last page this line number only).....▶	8807.68

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 19 OF 32
<input 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 checked="" type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Checksmart Financial LLC Political Action Committee

A. FRIENDS OF JOHN DELANEY

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 70835

City State Zip Code
BETHESDA MD 20813

FEC ID number of contributing federal political committee. **C** C00508416

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			05			2014			

Transaction ID : SA16.6420

Amount of Each Receipt this Period
1000.00

Check Returned

B. Friends of Lou Terhar

Full Name (Last, First, Middle Initial)
Mailing Address 5595 Boomer Road

City State Zip Code
Cincinnati OH 45247

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			09			2014			

Transaction ID : SA16.6467

Amount of Each Receipt this Period
500.00

Refund of State Candidate Contribution

C. MALONEY FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 49 EAST 92ND ST

City State Zip Code
NEW YORK NY 10128

FEC ID number of contributing federal political committee. **C** C00273169

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			05			2014			

Transaction ID : SA16.6418

Amount of Each Receipt this Period
1000.00

Return of Check

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: (check only one)	PAGE 20 OF 32
<input 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 checked="" type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Checksmart Financial LLC Political Action Committee

A. MICHAEL GRIMM FOR CONGRESS
Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 61806

City STATEN ISLAND	State NY	Zip Code 10306
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00470807

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	05	/	2014

Transaction ID : SA16.6419

Amount of Each Receipt this Period
1250.00

Check Returned

B. WESTMORELAND FOR CONGRESS
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 458

City SHARPSBURG	State GA	Zip Code 30277
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00387126

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	05	/	2014

Transaction ID : SA16.6414

Amount of Each Receipt this Period
1250.00

Return of Check

C.
Full Name (Last, First, Middle Initial)
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
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Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	5000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input 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)
Checksmart Financial LLC Political Action Committee

Full Name (Last, First, Middle Initial)

A. MCHENRY LEADERSHIP FUND

Mailing Address 228 S WASHINGTON ST STE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
Contribution to Joint Fundraising Committee

011

Candidate Name
PATRICK TIMOTHY MCHENRY

Category/
Type

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: NC District: 10

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			09			2014			

Transaction ID : SB23.6469

Amount of Each Disbursement this Period

15000.00

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

Amount of Each Disbursement this Period

--

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

Amount of Each Disbursement this Period

--

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

15000.00

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

15000.00

**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)
Checksmart Financial LLC Political Action Committee

Full Name (Last, First, Middle Initial)

A. Brenner for Ohio

Mailing Address 15 West Central Avenue

City Delaware State OH Zip Code 43015

Purpose of Disbursement
State Candidate Committee (Ohio)

Candidate Name

Office Sought: House
 Senate
 President
State: OH District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6439

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Butler for Ohio

Mailing Address 2321 Miami Village Drive

City Miamisburg State OH Zip Code 45342

Purpose of Disbursement
State Candidate Committee (Ohio)

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6429

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Citizens for Anne Gonzales

Mailing Address 865 Macon Al

City Columbus State OH Zip Code 43206

Purpose of Disbursement
State Candidate Committee (Ohio)

Candidate Name

Office Sought: House
 Senate
 President
State: OH District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6435

Amount of Each Disbursement this Period

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)
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)
Checksmart Financial LLC Political Action Committee

Full Name (Last, First, Middle Initial)

A. Citizens for Ashford

Mailing Address 2910 Collingwood

City Toledo State OH Zip Code 43620

Purpose of Disbursement
State Candidate Committee (Ohio)

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6450

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Citizens for Bishoff

Mailing Address 2902 Braden Way

City Blacklick State OH Zip Code 43004

Purpose of Disbursement
State Candidate Committee (Ohio)

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6426

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Citizens for Duffey

Mailing Address 645 Farrington Drive

City Worthington State OH Zip Code 43085

Purpose of Disbursement
State Candidate Committee (Ohio)

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6441

Amount of Each Disbursement this Period

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)
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)
Checksmart Financial LLC Political Action Committee

Full Name (Last, First, Middle Initial)

A. Citizens for Hall

Mailing Address 31 Hillside Drive

City Millersburg State OH Zip Code 44654

Purpose of Disbursement
State Candidate Committee (Ohio)

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 09 / 2014

Transaction ID : SB29.6428

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Citizens for Jim Hughes

Mailing Address 14 East Gay Street
2nd Floor

City Columbus State OH Zip Code 43215

Purpose of Disbursement
State Candidate Committee (Ohio)

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 09 / 2014

Transaction ID : SB29.6453

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Citizens for Kevin Bacon

Mailing Address 5325 Ponderosa Drive

City Columbus State OH Zip Code 43231

Purpose of Disbursement
State Candidate Committee (Ohio)

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 09 / 2014

Transaction ID : SB29.6458

Amount of Each Disbursement this Period

1000.00

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

2500.00

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)
Checksmart Financial LLC Political Action Committee

Full Name (Last, First, Middle Initial)

A. Citizens for Obhof

Mailing Address 5206 Crown Pointe Drive

City Medina State OH Zip Code 44256

Purpose of Disbursement
State Candidate Committee (Ohio)

Candidate Name

Office Sought: House Senate President
State: OH District:

Disbursement For: Primary General Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6460

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Citizens for Perales

Mailing Address 2766 Chatham Court

City Beavercreek State OH Zip Code 45431

Purpose of Disbursement
State Candidate Committee (Ohio)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6430

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Citizens for Sears

Mailing Address 6711 Monroe St.,
Building #, Suite D

City Sylvania State OH Zip Code 43560

Purpose of Disbursement
State Candidate Committee (Ohio)

Candidate Name

Office Sought: House Senate President
State: OH District:

Disbursement For: Primary General Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6433

Amount of Each Disbursement this Period

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)
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)
Checksmart Financial LLC Political Action Committee

Full Name (Last, First, Middle Initial)

A. Citizens for Stinziano

Mailing Address 550 East Walnut Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
State Candidate Committee (Ohio)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 09 / 2014

Transaction ID : SB29.6447

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Committee to Elect Cliff Hite

Mailing Address 2417 Westmoor Road

City Findlay State OH Zip Code 45840

Purpose of Disbursement
State Candidate Committee (Ohio)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 09 / 2014

Transaction ID : SB29.6459

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Committee to Elect Cliff Rosenberger

Mailing Address 7027 SR 350

City Clarksville State OH Zip Code 45113

Purpose of Disbursement
State Candidate Committee (Ohio)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 09 / 2014

Transaction ID : SB29.6427

Amount of Each Disbursement this Period

1000.00

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

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

2000.00

**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)
Checksmart Financial LLC Political Action Committee

Full Name (Last, First, Middle Initial)

A. Committee to Elect Fred Strahorn

Mailing Address 223 Kenwood Ave.

City Dayton State OH Zip Code 45405

Purpose of Disbursement
State Candidate Committee (Ohio)

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 09 / 2014

Transaction ID : SB29.6451

Amount of Each Disbursement this Period

400.00

Full Name (Last, First, Middle Initial)

B. Committee to Elect Joe Uecker

Mailing Address 298 Indianview Drive

City Loveland State OH Zip Code 45140

Purpose of Disbursement
State Candidate Committee (Ohio)

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 09 / 2014

Transaction ID : SB29.6462

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Committee to Elect Sean J. O'Brien

Mailing Address 7337 Sharon Warren Road

City Brookfield State OH Zip Code 44403

Purpose of Disbursement
State Candidate Committee (Ohio)

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 09 / 2014

Transaction ID : SB29.6444

Amount of Each Disbursement this Period

400.00

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

1300.00

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)
Checksmart Financial LLC Political Action Committee

Full Name (Last, First, Middle Initial)

A. Committee to Elect Stephen Slesnick

Mailing Address 4725 Greenbriar Square

City Canton State OH Zip Code 44717

Purpose of Disbursement
State Candidate Committee (Ohio)

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: OH District:

Date of Disbursement

MM / DD / YYYY
10 / 09 / 2014

Transaction ID : SB29.6452

Amount of Each Disbursement this Period

750.00

Full Name (Last, First, Middle Initial)

B. Emilia Sykes Campaign

Mailing Address 109 North Howard Street
Suite A

City Akron State OH Zip Code 44308

Purpose of Disbursement
State Candidate Committee (Ohio)

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 09 / 2014

Transaction ID : SB29.6448

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. Friends of David Leland

Mailing Address 367 East Broad Street
Suite 1002

City Columbus State OH Zip Code 43215

Purpose of Disbursement
State PAC Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 08 / 2014

Transaction ID : SB29.6423

Amount of Each Disbursement this Period

500.00

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

1500.00

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)
Checksmart Financial LLC Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends of Gary Scherer

Mailing Address 19920 Commercial Point Rd
P.O. Box 123

City State Zip Code
Circleville OH 43113

Purpose of Disbursement
State Candidate Committee (Ohio)

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB29.6431

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Friends of Kris Jordan

Mailing Address 161 Stonebend Drive

City State Zip Code
Powell OH 43065

Purpose of Disbursement
State Candidate Committee (Ohio)

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB29.6456

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Friends of Mike Henne

Mailing Address 8447 Diamond Mill Road

City State Zip Code
Clyton OH 45315

Purpose of Disbursement
State Candidate Committee (Ohio)

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB29.6437

Amount of Each Disbursement this Period

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)
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)
Checksmart Financial LLC Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends of Nicholas Celebrezze

Mailing Address 2344 Canal Road

City Cleveland State OH Zip Code 44113

Purpose of Disbursement
State Candidate Committee (Ohio)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6443

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Friends of Ryan Smith

Mailing Address 63 Cedar Street

City Gallipolis State OH Zip Code 45631

Purpose of Disbursement
State Candidate Committee (Ohio)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6432

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Friends of Timothy Derrickson

Mailing Address 1855 Gardner Road

City Hamilton State OH Zip Code 45013

Purpose of Disbursement
State Candidate Committee (Ohio)

Candidate Name

Office Sought: House Senate President
State: OH District:

Disbursement For: Primary General Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6442

Amount of Each Disbursement this Period

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)
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)
Checksmart Financial LLC Political Action Committee

Full Name (Last, First, Middle Initial)

A. Hagan for State Representative

Mailing Address 11301 Marlboro Avenue

City Alliance State OH Zip Code 44601

Purpose of Disbursement
State Candidate Committee (Ohio)

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 09 / 2014

Transaction ID : SB29.6440

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Romanchuk for Representative

Mailing Address 3306 Oakstone Drive

City Mansfield State OH Zip Code 44930

Purpose of Disbursement
State Candidate Committee (Ohio)

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 09 / 2014

Transaction ID : SB29.6436

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. Seitz for State Senate

Mailing Address 4401 Abby Ct.

City Cincinnati State OH Zip Code 45236

Purpose of Disbursement
State Candidate Committee (Ohio)

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 09 / 2014

Transaction ID : SB29.6461

Amount of Each Disbursement this Period

1000.00

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

1750.00

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)
Checksmart Financial LLC Political Action Committee

Full Name (Last, First, Middle Initial)

A. Team Burke

Mailing Address 275 West 4th Street

City Marysville State OH Zip Code 43040

Purpose of Disbursement
State Candidate Committee (Ohio)

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB29.6457

Amount of Each Disbursement this Period

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
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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