

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

12FE4M5

Wenstrup for Congress

ADDRESS (number and street) ▼

PO Box 9551

Check if different than previously reported. (ACC)

Cincinnati

OH

45209-0551

2. **FEC IDENTIFICATION NUMBER** ▼

C C00497818

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

OH

02

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)
- Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

- Primary (12P)  General (12G)  Runoff (12R)
- Convention (12C)  Special (12S)

Election on  /  /  in the State of

(c) 30-Day **POST**-Election Report for the:

- General (30G)  Runoff (30R)  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 Robert E. Carroll

Signature of Treasurer Robert E. Carroll

[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

Write or Type Committee Name  
**Wenstrup for Congress**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	223433	514685.07
(b) Total Contribution Refunds (from Line 20(d)) .....	2700	2700
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	220733	511985.07
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	67311.47	226397.93
(b) Total Offsets to Operating Expenditures (from Line 14).....	0	0
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	67311.47	226397.93
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	583738.67	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Wenstrup for Congress**

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2015 To: M M / D D / Y Y Y Y 09 / 30 / 2015

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	147780	361826.6
(ii) Unitemized.....	11903	39208.47
(iii) TOTAL of contributions from individuals ▶	159683	401035.07
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	63750	113650
(d) The Candidate.....	0	0
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	223433	514685.07
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....		
	0	0
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0	0
(b) All Other Loans.....	0	0
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0	0
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....		
	0	0
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	0	0
16. <b>TOTAL RECEIPTS</b> (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶		
	223433	514685.07

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	67311.47	226397.93
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	52500
(b) Of All Other Loans .....	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	52500
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	2700	2700
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	2700	2700
21. OTHER DISBURSEMENTS .....	950	3650
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	70961.47	285247.93

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	431267.14
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	223433
25. SUBTOTAL (add Line 23 and Line 24).....	654700.14
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	70961.47
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	583738.67

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 108
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Linda Driedger**

Mailing Address 3251 Seneca Drive

City Portsmouth State OH Zip Code 45662-2432

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

Name of Employer Dr. Harry J. Driedger, Inc. Occupation Office Manager

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 07 / 2015

**Transaction ID : A-CF7120**

Amount of Each Receipt this Period  
 250

**B.** Full Name (Last, First, Middle Initial)  
**Peter Klekamp**

Mailing Address 8680 Shawnee Run Road

City Cincinnati State OH Zip Code 45243-2812

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

Name of Employer PLK Communities, LLC Occupation Real Estate Professional

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 07 / 2015

**Transaction ID : A-CF7124**

Amount of Each Receipt this Period  
 1000

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

Mailing Address 5995 Park Road

City Cincinnati State OH Zip Code 45243-3413

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

Name of Employer Proscan Imaging Occupation Radiologist

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 07 / 2015

**Transaction ID : A-CF7127**

Amount of Each Receipt this Period  
 1000

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 108
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Thomas Gerdes**

Mailing Address 9100 Cunningham Road

City State Zip Code  
Cincinnati OH 45243-1506

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

Name of Employer Occupation  
Christ Hospital Physician

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 08 / 2015

**Transaction ID : A-CF7119**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Michael McGraw**

Mailing Address 324 E 4th Street

City State Zip Code  
Cincinnati OH 45202-4256

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

Name of Employer Occupation  
R.G. McGraw Insurance Agency Insurance Services Agent

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1150**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 08 / 2015

**Transaction ID : A-CF7109**

Amount of Each Receipt this Period  
**1000**

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

Mailing Address 2128 Rose Theatre Circle

City State Zip Code  
Olney MD 20832-1677

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

Name of Employer Occupation  
FASMA Podiatrist

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 15 / 2015

**Transaction ID : A-CF7137**

Amount of Each Receipt this Period  
**250**

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

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

**2250.00**

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

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

FOR LINE NUMBER: PAGE 7 OF 108  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Matthew Garoufalis**

Mailing Address 1933 Hansom Court

City Naperville State IL Zip Code 60565

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

Name of Employer Profess. Footcare Specialists Occupation Podiatrist

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **750**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 15 / 2015

**Transaction ID : A-CF7139**

Amount of Each Receipt this Period  
 500

**B.** Full Name (Last, First, Middle Initial)  
**Lee Rogers**

Mailing Address 18557 East Ashridge Drive

City Queen Creek State AZ Zip Code 85142

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

Name of Employer Self-Employed Occupation Podiatrist

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 15 / 2015

**Transaction ID : A-CF7138**

Amount of Each Receipt this Period  
 500

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

Mailing Address 12401 Willow Green Court

City Potomac State MD Zip Code 20854-3044

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

Name of Employer APMA Occupation Podiatrist & Chief Executive Officer

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 20 / 2015

**Transaction ID : A-CF7144**

Amount of Each Receipt this Period  
 500

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 108
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. L. Thomas Hiltz</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 20 / 2015
Mailing Address 50 E Rivercenter Boulevard Suite 620		<b>Transaction ID : A-CF7149</b>
City State Zip Code Covington KY 41011-1682	Amount of Each Receipt this Period 1000	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Self-Employed Attorney	Amount of Each Receipt this Period 1000
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

Full Name (Last, First, Middle Initial) <b>B. Frances T. Hughes</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 20 / 2015
Mailing Address 7360 Sanderson Place		<b>Transaction ID : A-CF7160</b>
City State Zip Code Cincinnati OH 45243	Amount of Each Receipt this Period 250	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Information Requested Information Requested	Amount of Each Receipt this Period 250
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

Full Name (Last, First, Middle Initial) <b>C. Thomas Humes</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 20 / 2015
Mailing Address 10123 Alliance Road Suite 100		<b>Transaction ID : A-CF7152</b>
City State Zip Code Blue Ash OH 45242-4714	Amount of Each Receipt this Period 1000	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Great Traditions Development President	Amount of Each Receipt this Period 1000
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2250.00
<b>TOTAL</b> This Period (last page this line number only).....	2250.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 108
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

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

Mailing Address 7688 Hampton Place Lane

City State Zip Code  
Cincinnati OH 45244-2970

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

Name of Employer Occupation  
Messer Construction Co. Senior Project Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 20 / 2015

**Transaction ID : A-CF7150**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Joseph Mayernik**

Mailing Address 4357 Ferguson Drive  
Suite 100

City State Zip Code  
Cincinnati OH 45245

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

Name of Employer Occupation  
Sonoma Holdings, LLC Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 20 / 2015

**Transaction ID : A-CF7151**

Amount of Each Receipt this Period  
**500**

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

Mailing Address 12070 Lakefront Drive

City State Zip Code  
Hillsboro OH 45133-9767

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

Name of Employer Occupation  
Joey's Pizza Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 20 / 2015

**Transaction ID : A-CF7161**

Amount of Each Receipt this Period  
**250**

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

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

**1000.00**

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

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

FOR LINE NUMBER: PAGE 10 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Paul Muething**

Mailing Address 6400 Kincaid Road

City State Zip Code  
Cincinnati OH 45213-1120

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

Name of Employer Occupation  
Keating Muething & Klekamp Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 20 2015**

**Transaction ID : A-CF7159**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Michael P. O'Rourke**

Mailing Address 370 Hawkins Ridge

City State Zip Code  
Cincinnati OH 45230-5271

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

Name of Employer Occupation  
O'Rourke Wrecking President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 20 2015**

**Transaction ID : A-CF7148**

Amount of Each Receipt this Period  
**1000**

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

Mailing Address 11261 Grandin Ridge Circle

City State Zip Code  
Cincinnati OH 45208

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

Name of Employer Occupation  
Entertainment Junction Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 20 2015**

**Transaction ID : A-CF7157**

Amount of Each Receipt this Period  
**2700**

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

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

**4700.00**

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

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

FOR LINE NUMBER: PAGE 11 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Gayle Oeters**

Mailing Address 11261 Grandin Ridge Circle

City State Zip Code  
Cincinnati OH 45208

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

Name of Employer Occupation  
Entertainment Junction Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 20 / 2015

**Transaction ID : A-CF7158**

Amount of Each Receipt this Period  
**2700**

**B.** Full Name (Last, First, Middle Initial)  
**Thomas Schiff**

Mailing Address 4 Grandin Terrace

City State Zip Code  
Cincinnati OH 45208-3405

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

Name of Employer Occupation  
JJ & TR Schiff & Co., Inc. Chairman & Chief Executive Officer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 20 / 2015

**Transaction ID : A-CF7154**

Amount of Each Receipt this Period  
**1000**

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

Mailing Address 1430 Apple Farm Lane

City State Zip Code  
Cincinnati OH 45230-5505

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2015

**Transaction ID : A-CF7146**

Amount of Each Receipt this Period  
**1000**

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

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

**4700.00**

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

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

FOR LINE NUMBER: PAGE 12 OF 108  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Thomas Mischell**

Mailing Address 1430 Apple Farm Lane

City State Zip Code  
Cincinnati OH 45230-5505

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2015

**Transaction ID : A-CF7147**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Michael Fisher**

Mailing Address 6915 Winding Way

City State Zip Code  
Cincinnati OH 45236-3334

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

Name of Employer Occupation  
Cincinnati Children's Chief Executive Officer

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 29 / 2015

**Transaction ID : A-CF7181**

Amount of Each Receipt this Period  
**250**

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

Mailing Address 2 Twin Hills Ridge Drive

City State Zip Code  
Cincinnati OH 45230-7131

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

Name of Employer Occupation  
JLM Diversified Chief Executive Officer

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 29 / 2015

**Transaction ID : A-CF7187**

Amount of Each Receipt this Period  
**1000**

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

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

**2250.00**

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

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

FOR LINE NUMBER: PAGE 13 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Stephen Mahon**

Mailing Address 2 Twin Hills Ridge Drive

City State Zip Code  
Cincinnati OH 45230-7131

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

Name of Employer Occupation  
Squire Patton Boggs Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 29 2015**

**Transaction ID : A-CF7178**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**R. Glen Mayfield**

Mailing Address 3240 Columbia Parkway

City State Zip Code  
Cincinnati OH 45226-1042

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

Name of Employer Occupation  
River Cities Mgmt. Co., Inc. Investment Manager

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2700**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 29 2015**

**Transaction ID : A-CF7180**

Amount of Each Receipt this Period  
**2700**

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

Mailing Address 10301 Chapel Rd

City State Zip Code  
Potomac MD 20854

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

Name of Employer Occupation  
Alignment Govt. Strategies Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 29 2015**

**Transaction ID : A-CF7179**

Amount of Each Receipt this Period  
**500**

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

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

**4200.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 108
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**David Lance**

Mailing Address 262 6th Street

City State Zip Code  
Bonita Springs FL 34134-7414

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**350**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 30 / 2015

**Transaction ID : A-CF7177**

Amount of Each Receipt this Period  
**100**

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

Mailing Address 100 West Riverfront Boulevard  
Penthouse #1B

City State Zip Code  
Covington KY 41011

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

Name of Employer Occupation  
Cintas Chairman

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2700**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2015

**Transaction ID : A-CF7185**

Amount of Each Receipt this Period  
**2700**

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

Mailing Address 7724 Ahwenasa Lane

City State Zip Code  
Cincinnati OH 45243-3233

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

Name of Employer Occupation  
Sure Thing Pest Control Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2700**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2015

**Transaction ID : A-CF7186**

Amount of Each Receipt this Period  
**2700**

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

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

**5500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 108
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Beth Brendamour**

Mailing Address 6105 Park Road

City Cincinnati State OH Zip Code 45243-3417

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 03 / 2015

**Transaction ID : A-CF7190**

Amount of Each Receipt this Period  
**2700**

**B.** Full Name (Last, First, Middle Initial)  
**Richard Abrahamson**

Mailing Address 1204 Red Roan Drive

City Loveland State OH Zip Code 45140-9016

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

Name of Employer Self-Employed Occupation Physician

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 10 / 2015

**Transaction ID : A-CF7194**

Amount of Each Receipt this Period  
**250**

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

Mailing Address 7850 Given Road

City Cincinnati State OH Zip Code 45243-1514

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

Name of Employer Netherland Rubber Company Occupation Chief Executive Officer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 11 / 2015

**Transaction ID : A-CF7213**

Amount of Each Receipt this Period  
**2700**

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

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

**5650.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 108
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Timothy Clarke**

Mailing Address 7850 Given Road

City State Zip Code  
Cincinnati OH 45243-1514

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

Name of Employer Occupation  
Netherland Rubber Company Chief Executive Officer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 11 / 2015**

**Transaction ID : A-CF7214**

Amount of Each Receipt this Period  
**300**

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

Mailing Address 6855 Alberly Lane

City State Zip Code  
Cincinnati OH 45243

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

Name of Employer Occupation  
Scanner Applications President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 11 / 2015**

**Transaction ID : A-CF7209**

Amount of Each Receipt this Period  
**250**

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

Mailing Address 128 East 2nd Street

City State Zip Code  
Covington KY 41011-2387

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

Name of Employer Occupation  
Anchor Properties Principal

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1800**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 11 / 2015**

**Transaction ID : A-CF7205**

Amount of Each Receipt this Period  
**1800**

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

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

**2350.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 108
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**S. George Kurz**

Mailing Address 11935 Mason Montgomery Road

City	State	Zip Code
Cincinnati	OH	45249-3708

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

Name of Employer	Occupation
Honey Baked Ham Co.	Chairman

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 11 / 2015

**Transaction ID : A-CF7221**

Amount of Each Receipt this Period  
500

**B.** Full Name (Last, First, Middle Initial)  
**Carl Lindner III**

Mailing Address 301 E 4th Street  
40S

City	State	Zip Code
Cincinnati	OH	45202

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

Name of Employer	Occupation
American Financial Group	Co-Chief Executive Officer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 11 / 2015

**Transaction ID : A-CF7203**

Amount of Each Receipt this Period  
2700

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

Mailing Address 534 Ponte Vedra Boulevard

City	State	Zip Code
Ponte Vedra	FL	32082-2316

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

Name of Employer	Occupation
Homemaker	Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 11 / 2015

**Transaction ID : A-CF7202**

Amount of Each Receipt this Period  
2700

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

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

5900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 108
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Edyth Lindner**

Mailing Address 8555 Shawnee Run Road

City Cincinnati State OH Zip Code 45243-3314

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 11 / 2015

**Transaction ID : A-CF7206**

Amount of Each Receipt this Period  
**2700**

**B.** Full Name (Last, First, Middle Initial)  
**Keith E. Lindner**

Mailing Address PO Box 508

City Mason State OH Zip Code 45040

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 11 / 2015

**Transaction ID : A-CF7201**

Amount of Each Receipt this Period  
**2700**

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

Mailing Address 301 E 4th Street  
40S

City Cincinnati State OH Zip Code 45202

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 11 / 2015

**Transaction ID : A-CF7204**

Amount of Each Receipt this Period  
**2700**

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

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

**8100.00**

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

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

FOR LINE NUMBER: PAGE 19 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Paul Niklas**

Mailing Address 3435 Golden Avenue  
Apartment 1402

City State Zip Code  
Cincinnati OH 45226

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

Name of Employer Occupation  
Self-Employed Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2200**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 11 / 2015

**Transaction ID : A-CF7207**

Amount of Each Receipt this Period  
**200**

**B.** Full Name (Last, First, Middle Initial)  
**Daniel S. Peters**

Mailing Address 5020 Taft Place

City State Zip Code  
Cincinnati OH 45243-3962

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

Name of Employer Occupation  
Peters Foundation President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 11 / 2015

**Transaction ID : A-CF7211**

Amount of Each Receipt this Period  
**1000**

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

Mailing Address 320 Broadway Street

City State Zip Code  
Cincinnati OH 45202-4224

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

Name of Employer Occupation  
Sheakley Chief Executive Officer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2700**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 11 / 2015

**Transaction ID : A-CF7208**

Amount of Each Receipt this Period  
**2700**

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

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

**3900.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 108
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Peter J. Stein**

Mailing Address 1164 Silver Beech Road

City Herndon State VA Zip Code 20170

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

Name of Employer APMA Occupation Director Legislative Advocacy

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 14 / 2015

**Transaction ID : A-CF7229**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Steven J. Berlin**

Mailing Address 6501 Red Hook Plaza Suite 201

City St Thomas State VI Zip Code 00802-1311

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

Name of Employer General Podiatric Medicine Occupation Podiatrist

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 17 / 2015

**Transaction ID : A-CF7274**

Amount of Each Receipt this Period  
**2500**

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

Mailing Address 1322 Pavilion Club Way

City Reston State VA Zip Code 20194-1338

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

Name of Employer Foot & Ankle Specialists Occupation Podiatrist

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 17 / 2015

**Transaction ID : A-CF7270**

Amount of Each Receipt this Period  
**250**

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

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

**3000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 108
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Nichol Salvo**

Mailing Address 9312 Old Georgetown Road

City State Zip Code  
Bethesda MD 20814-1621

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

Name of Employer Occupation  
APMA Podiatrist

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**750**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 17 / 2015

**Transaction ID : A-CF7272**

Amount of Each Receipt this Period  
**750**

**B.** Full Name (Last, First, Middle Initial)  
**James Stelnicki**

Mailing Address 6543 Madison Street

City State Zip Code  
New Port Richey FL 34652-1926

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

Name of Employer Occupation  
Self-Employed Podiatrist

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 17 / 2015

**Transaction ID : A-CF7266**

Amount of Each Receipt this Period  
**500**

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

Mailing Address 5089 Shattuc Avenue

City State Zip Code  
Cincinnati OH 45208-4267

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

Name of Employer Occupation  
Jeffrey G. Ayers & Assoc. Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 18 / 2015

**Transaction ID : A-CF7262**

Amount of Each Receipt this Period  
**250**

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

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

**1500.00**

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

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

FOR LINE NUMBER: PAGE 22 OF 108  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

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

Mailing Address 100 Agshore Court

City Slidell State LA Zip Code 70461

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

Name of Employer Self-Employed Occupation Podiatrist

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 19 / 2015**

**Transaction ID : A-CF7238**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Robert D Davis**

Mailing Address 450 Clement Lane

City Orange State CT Zip Code 06477-2803

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

Name of Employer Family Podiatry Center Occupation Podiatrist

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 19 / 2015**

**Transaction ID : A-CF7258**

Amount of Each Receipt this Period  
**500**

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

Mailing Address 3933 East 191st

City Westfield State IN Zip Code 46062

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

Name of Employer Hoosier Foot & Ankle Occupation Podiatrist

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 19 / 2015**

**Transaction ID : A-CF7242**

Amount of Each Receipt this Period  
**250**

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

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

**1250.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 108
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**David Edwards**

Mailing Address 1651 Saddle Hill Drive

City Logan State UT Zip Code 84321-3001

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

Name of Employer Self-Employed Occupation Physician

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 19 / 2015

**Transaction ID : A-CF7233**

Amount of Each Receipt this Period  
**150**

**B.** Full Name (Last, First, Middle Initial)  
**Barney Greenberg**

Mailing Address 2651 Hollywood Boulevard

City Hollywood State FL Zip Code 33020-4840

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

Name of Employer Podiatry Associates Occupation Podiatrist

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 19 / 2015

**Transaction ID : A-CF7246**

Amount of Each Receipt this Period  
**250**

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

Mailing Address 3622 Emory Way

City Pomona State CA Zip Code 91767-1109

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

Name of Employer Western University Health Occupation Podiatrist

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 19 / 2015

**Transaction ID : A-CF7261**

Amount of Each Receipt this Period  
**1000**

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

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

**1400.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 108
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jondelle B. Jenkins**

Mailing Address 1706 East 87th Street

City Chicago State IL Zip Code 60617

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

Name of Employer Occupation  
JB Jenkins & Assoc Podiatrist

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 19 / 2015

**Transaction ID : A-CF7256**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Randy Kaplan**

Mailing Address 6578 Post Oak Drive

City West Bloomfield State MI Zip Code 48322-3830

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

Name of Employer Occupation  
Self-Employed Podiatrist

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 19 / 2015

**Transaction ID : A-CF7248**

Amount of Each Receipt this Period  
**250**

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

Mailing Address 20 Dogwood Trail

City Ringgold State GA Zip Code 30736

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

Name of Employer Occupation  
Advanced Foot Care Podiatrist

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 19 / 2015

**Transaction ID : A-CF7249**

Amount of Each Receipt this Period  
**250**

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

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

**750.00**



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

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

FOR LINE NUMBER: PAGE 25 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lawrence Santi**

Mailing Address 240 E 5th Street

City State Zip Code  
Brooklyn NY 11218-2404

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

Name of Employer Occupation  
Santi Podiatry Group Podiatrist

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 19 / 2015**

**Transaction ID : A-CF7234**

Amount of Each Receipt this Period  
**200**

**B.** Full Name (Last, First, Middle Initial)  
**Lawrence Santi**

Mailing Address 240 E 5th Street

City State Zip Code  
Brooklyn NY 11218-2404

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

Name of Employer Occupation  
Santi Podiatry Group Podiatrist

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 19 / 2015**

**Transaction ID : A-CF7235**

Amount of Each Receipt this Period  
**200**

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

Mailing Address 310 Meadow Lake Lane

City State Zip Code  
Lake Forest IL 60045-4802

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

Name of Employer Occupation  
Am. Board of Foot/Ankle Surg Podiatrist

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 19 / 2015**

**Transaction ID : A-CF7247**

Amount of Each Receipt this Period  
**250**

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

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

**650.00**

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

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

FOR LINE NUMBER: PAGE 26 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Phillip E. Ward**

Mailing Address 2321 Timberlane Drive

City State Zip Code  
Florene SC 29506

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

Name of Employer Occupation  
C.C. Foot & Ankle Associates Podiatrist

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**08 19 2015**

**Transaction ID : A-CF7236**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Barry Bucher**

Mailing Address 8725 Blome Rd

City State Zip Code  
Cincinnati OH 45243

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

Name of Employer Occupation  
AIM MRO Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**08 21 2015**

**Transaction ID : A-CF7315**

Amount of Each Receipt this Period  
**2000**

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

Mailing Address 316 Woodland Drive

City State Zip Code  
Hillsboro OH 45133

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**08 21 2015**

**Transaction ID : A-CF7578**

Amount of Each Receipt this Period  
**500**

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

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

**2750.00**

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

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

FOR LINE NUMBER: PAGE 27 OF 108  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Edward Castleberry**

Mailing Address 1041 Catawba Valley Drive

City State Zip Code  
Cincinnati OH 45226-1701

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**450**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 21 / 2015**

**Transaction ID : A-CF7308**

Amount of Each Receipt this Period  
**200**

**B.** Full Name (Last, First, Middle Initial)  
**William Cyr**

Mailing Address 2709 Johnstone Place

City State Zip Code  
Cincinnati OH 45206-1822

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

Name of Employer Occupation  
Sunny Delight President

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 21 / 2015**

**Transaction ID : A-CF7306**

Amount of Each Receipt this Period  
**1000**

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

Mailing Address 301 E 4th Street  
Floor 40

City State Zip Code  
Cincinnati OH 45202-4245

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

Name of Employer Occupation  
American Financial Group Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**2700**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 21 / 2015**

**Transaction ID : A-CF7299**

Amount of Each Receipt this Period  
**2700**

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

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

**3900.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 108
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Joseph Head Jr.**

Mailing Address 8855 Camargo Club Drive

City State Zip Code  
Cincinnati OH 45243-3336

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 21 / 2015**

**Transaction ID : A-CF7319**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Barbara N. Juengling**

Mailing Address 8073 Ashley View Drive

City State Zip Code  
Cincinnati OH 45227-3956

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 21 / 2015**

**Transaction ID : A-CF7297**

Amount of Each Receipt this Period  
**250**

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

Mailing Address 2958 Alpine Terrace

City State Zip Code  
Cincinnati OH 45208-3408

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

Name of Employer Occupation  
The Christ Hospital Healthcare

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 21 / 2015**

**Transaction ID : A-CF7300**

Amount of Each Receipt this Period  
**250**

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

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

**1500.00**

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

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

FOR LINE NUMBER: PAGE 29 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**William Keating Jr.**

Mailing Address 4 Rennel Drive

City State Zip Code  
Cincinnati OH 45226-1235

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

Name of Employer Occupation  
Keating Muething & Klekamp Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 21 / 2015**

**Transaction ID : A-CF7301**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Frances Lindner**

Mailing Address 7725 Buckingham Road

City State Zip Code  
Cincinnati OH 45243-1605

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2700**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 21 / 2015**

**Transaction ID : A-CF7304**

Amount of Each Receipt this Period  
**2700**

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

Mailing Address 7725 Buckingham Road

City State Zip Code  
Cincinnati OH 45243-1605

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

Name of Employer Occupation  
American Financial Group Co-Chief Executive Officer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2700**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 21 / 2015**

**Transaction ID : A-CF7305**

Amount of Each Receipt this Period  
**2700**

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

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

**5900.00**

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

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

FOR LINE NUMBER: PAGE 30 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jeff McGrath**

Mailing Address 6368 Turpin Hills Drive

City State Zip Code  
Cincinnati OH 45244-3559

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

Name of Employer Occupation  
Midwest Practice Solutions Business Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 21 2015**

**Transaction ID : A-CF7277**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Alfred Nippert**

Mailing Address 380 Albion Avenue

City State Zip Code  
Glendale OH 45246-4637

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

Name of Employer Occupation  
Nippert & Nippert Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 21 2015**

**Transaction ID : A-CF7320**

Amount of Each Receipt this Period  
**250**

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

Mailing Address 322 Bishopsbridge Drive

City State Zip Code  
Cincinnati OH 45255-3947

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

Name of Employer Occupation  
RCF/GBI Chief Executive Officer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 21 2015**

**Transaction ID : A-CF7303**

Amount of Each Receipt this Period  
**250**

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

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

**750.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 108
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Debra K Rouse</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 21 / 2015
Mailing Address 3157 Hawkslanding Drive		<b>Transaction ID : A-CF7309</b>
City Cincinnati	State OH	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

Full Name (Last, First, Middle Initial) <b>B. Robert Schiff Jr.</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 21 / 2015
Mailing Address 5695 Drake Road		<b>Transaction ID : A-CF7316</b>
City Cincinnati	State OH	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Pediatric Association of Cinci	Occupation Pediatrician	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

Full Name (Last, First, Middle Initial) <b>C. Arthur H. Schlemmer</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 21 / 2015
Mailing Address 3074 Madison Road		<b>Transaction ID : A-CF7302</b>
City Cincinnati	State OH	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer Barron, Peck Bennie & Schlem	Occupation Attorney	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 108
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Harold Shevers**

Mailing Address 1172 Riverside Drive

City State Zip Code  
Cincinnati OH 45202

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

Name of Employer Occupation  
Sportys Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 21 / 2015**

**Transaction ID : A-CF7317**

Amount of Each Receipt this Period  
**2700**

**B.** Full Name (Last, First, Middle Initial)  
**Harold Shevers**

Mailing Address 1172 Riverside Drive

City State Zip Code  
Cincinnati OH 45202

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

Name of Employer Occupation  
Sportys Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 21 / 2015**

**Transaction ID : A-CF7318**

Amount of Each Receipt this Period  
**2700**

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

Mailing Address 3548 Totten Avenue

City State Zip Code  
Cincinnati OH 45226-1260

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

Name of Employer Occupation  
Everest Real Estate Senior Vice President/Partner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 21 / 2015**

**Transaction ID : A-CF7314**

Amount of Each Receipt this Period  
**250**

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

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

**5650.00**



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

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

FOR LINE NUMBER: PAGE 33 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Joseph L. Trauth Jr.**

Mailing Address 2 Cloister Court

City State Zip Code  
Cincinnati OH 45208-1500

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

Name of Employer Occupation  
Keating Muething & Klekamp Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 21 2015**

**Transaction ID : A-CF7321**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Christopher Vollmer**

Mailing Address 7590 Given Road

City State Zip Code  
Cincinnati OH 45243-1538

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

Name of Employer Occupation  
Colliers International Senior Vice President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**450**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 21 2015**

**Transaction ID : A-CF7312**

Amount of Each Receipt this Period  
**250**

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

Mailing Address 212 E 3rd Street  
Suite 300

City State Zip Code  
Cincinnati OH 45202-5500

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 21 2015**

**Transaction ID : A-CF7310**

Amount of Each Receipt this Period  
**2700**

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

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

**3200.00**

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

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

FOR LINE NUMBER: PAGE 34 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Thomas Williams**

Mailing Address 4300 Willow Hills Lane

City State Zip Code  
Cincinnati OH 45243

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

Name of Employer Occupation  
North American Properties President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 21 / 2015**

**Transaction ID : A-CF7311**

Amount of Each Receipt this Period  
**2700**

**B.** Full Name (Last, First, Middle Initial)  
**Frank C Woodside III**

Mailing Address 205 Elm Avenue

City State Zip Code  
Wyoming OH 45215

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

Name of Employer Occupation  
Dinsmore & Shohl LLP Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 21 / 2015**

**Transaction ID : A-CF7307**

Amount of Each Receipt this Period  
**500**

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

Mailing Address 7410 Ayers Road

City State Zip Code  
Cincinnati OH 45255-3913

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

Name of Employer Occupation  
The Plastic Surgery Group Physician

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 24 / 2015**

**Transaction ID : A-CF7290**

Amount of Each Receipt this Period  
**250**

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

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

**3450.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 108
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**James D. Petricone**

Mailing Address 6857 Kenwood Road

City State Zip Code  
Cincinnati OH 45243-2325

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

Name of Employer Occupation  
Petricone & Pick DDS, Inc Dentist

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**375**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 24 / 2015

**Transaction ID : A-CF7330**

Amount of Each Receipt this Period  
**125**

**B.** Full Name (Last, First, Middle Initial)  
**Wael Safi**

Mailing Address 6607 Villagefield Drive

City State Zip Code  
Mason OH 45040-8967

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

Name of Employer Occupation  
Procter & Gamble Open Innovation Manager

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 24 / 2015

**Transaction ID : A-CF7287**

Amount of Each Receipt this Period  
**250**

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

Mailing Address 9075 Old Indian Hill Road

City State Zip Code  
Cincinnati OH 45243-3750

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

Name of Employer Occupation  
Dinsmore & Shohl Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**600**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 24 / 2015

**Transaction ID : A-CF7286**

Amount of Each Receipt this Period  
**100**

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

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

**475.00**

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

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

FOR LINE NUMBER: PAGE 36 OF 108  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Carol Snyder**

Mailing Address 7229 Overton Way

City State Zip Code  
Maineville OH 45039-8607

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

Name of Employer Occupation  
Wellington Orthopedics Orthopedic Surgeon

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 24 / 2015

**Transaction ID : A-CF7292**

Amount of Each Receipt this Period  
500

**B.** Full Name (Last, First, Middle Initial)  
**Mark Snyder**

Mailing Address 7229 Overton Way

City State Zip Code  
Maineville OH 45039-8607

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

Name of Employer Occupation  
Wellington Group Orthopaedic Surgeon

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 24 / 2015

**Transaction ID : A-CF7291**

Amount of Each Receipt this Period  
500

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

Mailing Address 4600 North Mason Montgomery Road

City State Zip Code  
Mason OH 45040-9176

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

Name of Employer Occupation  
The Armor Group Chief Executive Officer

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 25 / 2015

**Transaction ID : A-CF7326**

Amount of Each Receipt this Period  
1000

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 108
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A. Critical Solutions Alternative LLC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 45208

City	State	Zip Code
Cincinnati	OH	45208

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

Name of Employer	Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2015

**Transaction ID : A-CF7398**

Amount of Each Receipt this Period  
**250**  
 Verified Sole Proprietor

Contribution from Partnership. Partners exceeding reporting threshold itemized as memos.

**B. Derek Joseph**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 45208

City	State	Zip Code
Cincinnati	OH	45208

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

Name of Employer	Occupation
Critical Solutions Altern	Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2015

**Transaction ID : A-PIP20**

Amount of Each Receipt this Period  
**250**  
 Verified Sole Proprietor

**[MEMO ITEM]**  
 Partnership Itemization Memo

**C. Louis D. George Consulting**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2536 Observatory Avenue

City	State	Zip Code
Cincinnati	OH	45208

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

Name of Employer	Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2015

**Transaction ID : A-CF7382**

Amount of Each Receipt this Period  
**1000**  
 Verified Sole Proprietor

Contribution from Partnership. Partners exceeding reporting threshold itemized as memos.

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

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

**1250.00**

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

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

FOR LINE NUMBER: PAGE 38 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Louis D George**

Mailing Address 2536 Observatory Avenue

City State Zip Code  
Cincinnati OH 45208

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

Name of Employer Occupation  
Louis D. George Consulting Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 28 2015

**Transaction ID : A-PIP19**

Amount of Each Receipt this Period  
1000

Verified Sole Proprietor

**[MEMO ITEM]**  
Partnership Itemization Memo

**B.** Full Name (Last, First, Middle Initial)  
**Frederick Bryan III**

Mailing Address 8980 Indian Ridge Lane

City State Zip Code  
Cincinnati OH 45243-3718

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 28 2015

**Transaction ID : A-CF7354**

Amount of Each Receipt this Period  
1000

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

Mailing Address PO Box 75020

City State Zip Code  
Cincinnati OH 45275-0020

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

Name of Employer Occupation  
Corporex Chief Executive Officer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 28 2015

**Transaction ID : A-CF7397**

Amount of Each Receipt this Period  
1000

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 108
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mary Ann Capano**

Mailing Address 5743 Juliemarie Court

City Cincinnati State OH Zip Code 45239-7131

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2015

**Transaction ID : A-CF7450**

Amount of Each Receipt this Period  
 50

**B.** Full Name (Last, First, Middle Initial)  
**Roy G. Chew**

Mailing Address 7949 Frostwood Court

City Springboro State OH Zip Code 45066

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2015

**Transaction ID : A-CF7418**

Amount of Each Receipt this Period  
 250

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

Mailing Address 551 Missouri Avenue

City Cincinnati State OH Zip Code 45226-1120

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

Name of Employer Self-Employed Occupation Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2015

**Transaction ID : A-CF7405**

Amount of Each Receipt this Period  
 250

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

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

550.00

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

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

FOR LINE NUMBER: PAGE 40 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ronald Connovich**

Mailing Address 5406 Utica Road

City State Zip Code  
Waynesville OH 45068

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

Name of Employer Occupation Information Requested  
Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 28 2015

**Transaction ID : A-CF7413**

Amount of Each Receipt this Period  
250

**B.** Full Name (Last, First, Middle Initial)  
**John W. Croxton**

Mailing Address 2050 Beechmont Avenue

City State Zip Code  
Cincinnati OH 45230-1662

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

Name of Employer Occupation Information Requested  
TP White & Sons Director

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 28 2015

**Transaction ID : A-CF7437**

Amount of Each Receipt this Period  
100

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

Mailing Address Information Requested

City State Zip Code

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

Name of Employer Occupation Information Requested  
Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 28 2015

**Transaction ID : A-CF7415**

Amount of Each Receipt this Period  
250

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

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

600.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 108
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**William Dewitt Jr.**

Mailing Address 300 Main Street

City State Zip Code  
Cincinnati OH 45202-4159

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

Name of Employer Occupation  
Reynold's Dewitt & Co. President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 28 / 2015**

**Transaction ID : A-CF7391**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Joyce S. Dill**

Mailing Address 3725 W Center Street

City State Zip Code  
Cincinnati OH 45227-4446

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**700**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 28 / 2015**

**Transaction ID : A-CF7360**

Amount of Each Receipt this Period  
**200**

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

Mailing Address 329 Bishopsbridge Drive

City State Zip Code  
Cincinnati OH 45255-3948

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

Name of Employer Occupation  
Taft Stettinius & Hollister Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3700**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 28 / 2015**

**Transaction ID : A-CF7431**

Amount of Each Receipt this Period  
**1000**

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

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

**2200.00**

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

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

FOR LINE NUMBER: PAGE 42 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Nelson B. Ernest**

Mailing Address 675 Reynard Avenue

City State Zip Code  
Cincinnati OH 45231-5062

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**230**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 28 2015**

**Transaction ID : A-CF7378**

Amount of Each Receipt this Period  
**30**

**B.** Full Name (Last, First, Middle Initial)  
**Charles Gerhardt III**

Mailing Address 700 Walnut Street  
Suite 450

City State Zip Code  
Cincinnati OH 45202-2011

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

Name of Employer Occupation  
Government Strategies Group Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 28 2015**

**Transaction ID : A-CF7392**

Amount of Each Receipt this Period  
**1000**

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

Mailing Address 8345 Arapaho Lane

City State Zip Code  
Cincinnati OH 45243-2717

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 28 2015**

**Transaction ID : A-CF7335**

Amount of Each Receipt this Period  
**2700**

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

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

**3730.00**

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

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

FOR LINE NUMBER: PAGE 43 OF 108  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Gary Greenberg**

Mailing Address 425 Walnut Street  
Suite 2300

City Cincinnati State OH Zip Code 45202-3917

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

Name of Employer Denlinger, Rosenthal and Green Occupation Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **700**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2015

**Transaction ID : A-CF7385**

Amount of Each Receipt this Period  
**200**

**B.** Full Name (Last, First, Middle Initial)  
**Terrence Horan**

Mailing Address 10298 Gentlewind Drive

City Montgomery State OH Zip Code 45242-5813

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

Name of Employer Horan & Associates Occupation President

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2700**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2015

**Transaction ID : A-CF7407**

Amount of Each Receipt this Period  
**2700**

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

Mailing Address 700 Apple Hill Road

City Cincinnati State OH Zip Code 45230

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

Name of Employer Taft Stettinius & Hollister LL Occupation Partner

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2015

**Transaction ID : A-CF7411**

Amount of Each Receipt this Period  
**250**

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

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

**3150.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 108
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Paula Iacobell**

Mailing Address 6434 Katherine Manor Court

City State Zip Code  
Liberty Twp OH 45011-9232

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

Name of Employer Occupation Information Requested  
Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 28 2015**

**Transaction ID : A-CF7410**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Stephen Ionna**

Mailing Address 8521 Saint Ives Place

City State Zip Code  
Cincinnati OH 45255-5641

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

Name of Employer Occupation Information Requested  
CGI Physician

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 28 2015**

**Transaction ID : A-CF7355**

Amount of Each Receipt this Period  
**1000**

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

Mailing Address 2900 Grandin Road

City State Zip Code  
Cincinnati OH 45208-3418

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

Name of Employer Occupation Information Requested  
Joseph Automotive Group Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**750**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 28 2015**

**Transaction ID : A-CF7399**

Amount of Each Receipt this Period  
**250**

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

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

**1500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 108
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Marcia Joseph**

Mailing Address 1116 Leafree Court

City State Zip Code  
Cincinnati OH 45208-2808

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

Name of Employer Occupation  
Camargo Racquet Club General Manager

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 28 / 2015**

**Transaction ID : A-CF7402**

Amount of Each Receipt this Period  
**2000**

**B.** Full Name (Last, First, Middle Initial)  
**Ronald Joseph**

Mailing Address 250 East 5th Street

City State Zip Code  
Cincinnati OH 45202-4119

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

Name of Employer Occupation  
Joseph Auto Group Chief Executive Officer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**4500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 28 / 2015**

**Transaction ID : A-CF7460**

Amount of Each Receipt this Period  
**200**

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

Mailing Address 250 East 5th Street

City State Zip Code  
Cincinnati OH 45202-4119

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

Name of Employer Occupation  
Joseph Auto Group Chief Executive Officer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**4500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 28 / 2015**

**Transaction ID : A-CF7470**

Amount of Each Receipt this Period  
**1800**

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

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

**4000.00**

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

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

FOR LINE NUMBER: PAGE 46 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Scott Kane**

Mailing Address 6136 Hummingbird Drive

City State Zip Code  
Mason OH 45040-9315

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

Name of Employer Occupation  
Squire Patton Boggs Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 28 / 2015**

**Transaction ID : A-CF7388**

Amount of Each Receipt this Period  
**300**

**B.** Full Name (Last, First, Middle Initial)  
**Anne Kereiakes**

Mailing Address 7405 Old Hickory Lane

City State Zip Code  
Cincinnati OH 45243-1454

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 28 / 2015**

**Transaction ID : A-CF7429**

Amount of Each Receipt this Period  
**2700**

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

Mailing Address 7405 Old Hickory Lane

City State Zip Code  
Cincinnati OH 45243-1454

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

Name of Employer Occupation  
The Christ Hospital Physician

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 28 / 2015**

**Transaction ID : A-CF7427**

Amount of Each Receipt this Period  
**2700**

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

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

**5700.00**

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

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

FOR LINE NUMBER: PAGE 47 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Donald Kirchner**

Mailing Address 1298 Mistymeadow Lane

City State Zip Code  
Cincinnati OH 45230-3589

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

Name of Employer Occupation  
Procter & Gamble Manager

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 28 / 2015**

**Transaction ID : A-CF7358**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Rebecca A. Lewis**

Mailing Address 3055 King James Drive

City State Zip Code  
Beavercreek OH 45432

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 28 / 2015**

**Transaction ID : A-CF7412**

Amount of Each Receipt this Period  
**250**

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

Mailing Address 1045 Meta Drive

City State Zip Code  
Cincinnati OH 45237-5007

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

Name of Employer Occupation  
Outdoor Environments, Inc. President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 28 / 2015**

**Transaction ID : A-CF7433**

Amount of Each Receipt this Period  
**200**

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

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

**550.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 108
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Fred Manchur**

Mailing Address 3500 Stonebridge Road

City Kettering State OH Zip Code 45419-1133

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 28 / 2015**

**Transaction ID : A-CF7356**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Vince Mauer**

Mailing Address 7208 Concordridge Drive

City Cincinnati State OH Zip Code 45244-3604

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

Name of Employer Information Requested Occupation Information Requested

Frost Brown Todd Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2100**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 28 / 2015**

**Transaction ID : A-CF7446**

Amount of Each Receipt this Period  
**300**

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

Mailing Address 12070 Lakefront Drive

City Hillsboro State OH Zip Code 45133-9767

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

Name of Employer Information Requested Occupation Information Requested

Joey's Pizza Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 28 / 2015**

**Transaction ID : A-CF7368**

Amount of Each Receipt this Period  
**250**

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

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

**800.00**



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

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

FOR LINE NUMBER: (check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 49 OF 108

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**George H. Meier**

Mailing Address 5435 Hobbit Road

City State Zip Code  
 Cincinnati OH 45243

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

Name of Employer Occupation  
 University of Cincinnati Physician

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 250

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2015

**Transaction ID : A-CF7395**

Amount of Each Receipt this Period  
 250

**B.** Full Name (Last, First, Middle Initial)  
**Kam Misleh**

Mailing Address 5710 Windridge View

City State Zip Code  
 Cincinnati OH 45243-2981

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

Name of Employer Occupation  
 Skyline Chili Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 250

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2015

**Transaction ID : A-CF7409**

Amount of Each Receipt this Period  
 250

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

Mailing Address 1279 E Dublin Granville Road

City State Zip Code  
 Columbus OH 43229-3300

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

Name of Employer Occupation  
 Kingsley Wells Enterprises CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2015

**Transaction ID : A-CF7471**

Amount of Each Receipt this Period  
 1000

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 108
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Judy Recker**

Mailing Address 4625 Burley Hills Drive

City State Zip Code  
Cincinnati OH 45243

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

Name of Employer Occupation  
Sibcy Cline Real Estate Sales

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2015

**Transaction ID : A-CF7421**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Mark Ruehlmann**

Mailing Address 8300 Carolines Trail

City State Zip Code  
Cincinnati OH 45242-4543

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

Name of Employer Occupation  
Squire Patton Boggs Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2015

**Transaction ID : A-CF7387**

Amount of Each Receipt this Period  
**500**

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

Mailing Address 1931 Alda Court

City State Zip Code  
Centerville OH 45459

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2015

**Transaction ID : A-CF7416**

Amount of Each Receipt this Period  
**250**

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

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

**1000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 108
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Deborah Sagan**

Mailing Address 9870 Cunningham Road

City State Zip Code  
Cincinnati OH 45243-1626

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

Name of Employer Occupation  
Sagan, Inc. Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2015

**Transaction ID : A-CF7404**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Carl R. Schlotman Jr.**

Mailing Address 8551 New England Court

City State Zip Code  
Cincinnati OH 45236-2093

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**350**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2015

**Transaction ID : A-CF7401**

Amount of Each Receipt this Period  
**250**

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

Mailing Address 7198 Green Ash Court

City State Zip Code  
Dayton OH 45459

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2015

**Transaction ID : A-CF7417**

Amount of Each Receipt this Period  
**250**

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

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

**750.00**

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

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

FOR LINE NUMBER: PAGE 52 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Peter J. Stern**

Mailing Address 231 Albert Sabin Way  
3109 145B

City State Zip Code  
Cincinnati OH 45267

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

Name of Employer Occupation  
University of Cincinnati Hand Surgeon

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**450**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 28 2015**

**Transaction ID : A-CF7406**

Amount of Each Receipt this Period  
**200**

**B.** Full Name (Last, First, Middle Initial)  
**George Vincent**

Mailing Address 8150 Varner Road

City State Zip Code  
Cincinnati OH 45243-4130

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

Name of Employer Occupation  
Dinsmore & Shohl Managing Partner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 28 2015**

**Transaction ID : A-CF7420**

Amount of Each Receipt this Period  
**1000**

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

Mailing Address 7590 Given Road

City State Zip Code  
Cincinnati OH 45243-1538

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

Name of Employer Occupation  
Colliers International Senior Vice President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**450**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 28 2015**

**Transaction ID : A-CF7425**

Amount of Each Receipt this Period  
**200**

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

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

**1400.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 108
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Russell J. Wetherell**

Mailing Address 1691 Ladera Trail

City Dayton State OH Zip Code 45459

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 28 / 2015**

**Transaction ID : A-CF7414**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Donald Zimmerman Jr.**

Mailing Address 9020 Shawnee Run Road

City Cincinnati State OH Zip Code 45243-2820

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

Name of Employer Information Requested Occupation Information Requested  
 Heater Meals Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 28 / 2015**

**Transaction ID : A-CF7393**

Amount of Each Receipt this Period  
**500**

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

Mailing Address 1031A Saint Gregory Street

City Cincinnati State OH Zip Code 45202-1721

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

Name of Employer Information Requested Occupation Information Requested  
 Premier Planning Group Financial Advisor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 31 / 2015**

**Transaction ID : A-CF7344**

Amount of Each Receipt this Period  
**250**

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

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

**1000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 108
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Martin Mooney**

Mailing Address 5591 Squirrel Run Lane

City State Zip Code  
Cincinnati OH 45247

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

Name of Employer Occupation  
Frost Brown Todd LLC Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 01 / 2015

**Transaction ID : A-CF7346**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Richard Roettker**

Mailing Address 3843 Foxtail Lane

City State Zip Code  
Cincinnati OH 45248-1345

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

Name of Employer Occupation  
B.H. Roettker Co. President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 01 / 2015

**Transaction ID : A-CF7337**

Amount of Each Receipt this Period  
**250**

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

Mailing Address 6690 Morgans Run Road

City State Zip Code  
Loveland OH 45140-7205

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

Name of Employer Occupation  
The Wornick Company President and CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 02 / 2015

**Transaction ID : A-CF7338**

Amount of Each Receipt this Period  
**1000**

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

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

**1500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 108
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Turner Wilkerson III**

Mailing Address 4769 Beechwood Farms Drive

City State Zip Code  
Cincinnati OH 45244-1278

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 10 / 2015

**Transaction ID : A-CF7467**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**William Butler**

Mailing Address PO Box 75020

City State Zip Code  
Cincinnati OH 45275-0020

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

Name of Employer Occupation  
Corporex Chief Executive Officer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 17 / 2015

**Transaction ID : A-CF7490**

Amount of Each Receipt this Period  
**1000**

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

Mailing Address 6847 Cintas Boulevard  
Suite 120

City State Zip Code  
Mason OH 45040-9101

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2700**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 17 / 2015

**Transaction ID : A-CF7495**

Amount of Each Receipt this Period  
**2700**

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

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

**3950.00**

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

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

FOR LINE NUMBER: PAGE 56 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Scott Farmer**

Mailing Address 6847 Cintas Boulevard  
Suite 120

City State Zip Code  
Mason OH 45040-9101

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

Name of Employer Occupation  
Cintas President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2700**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2015

**Transaction ID : A-CF7494**

Amount of Each Receipt this Period  
**2700**

**B.** Full Name (Last, First, Middle Initial)  
**Terrence Howe**

Mailing Address 716 Park Avenue

City State Zip Code  
Terrace Park OH 45174-1021

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

Name of Employer Occupation  
Big Chief President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2015

**Transaction ID : A-CF7488**

Amount of Each Receipt this Period  
**1000**

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

Mailing Address 1260 Michigan Avenue

City State Zip Code  
Cincinnati OH 45208-2725

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2015

**Transaction ID : A-CF7489**

Amount of Each Receipt this Period  
**250**

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

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

**3950.00**



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

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

FOR LINE NUMBER: PAGE 57 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Lindner Jr.**

Mailing Address 4585 Drake Road

City State Zip Code  
Cincinnati OH 45243-4115

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

Name of Employer Occupation  
United Dairy Farmers, Inc. Treasurer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2015

**Transaction ID : A-CF7493**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Stephen B. Clark**

Mailing Address 9273 Lerwick Drive

City State Zip Code  
Dublin OH 43017-9492

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

Name of Employer Occupation  
CGCN Group Partner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 18 / 2015

**Transaction ID : A-CF7522**

Amount of Each Receipt this Period  
**500**

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

Mailing Address 6655 Knottypine Drive

City State Zip Code  
Cincinnati OH 45230-1463

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

Name of Employer Occupation  
Equity, Inc. Real Estate Salesperson

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 18 / 2015

**Transaction ID : A-CF7482**

Amount of Each Receipt this Period  
**250**

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

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

**1750.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 108
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Paula Kollstedt**

Mailing Address 5391 Haft Road

City State Zip Code  
Cincinnati OH 45247

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

Name of Employer Occupation  
Alzheimers Assn of Cinci Executive Director

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 18 / 2015**

**Transaction ID : A-CF7479**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Alvin Roehr Jr.**

Mailing Address 4765 Burley Hills Drive

City State Zip Code  
Cincinnati OH 45243-4007

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

Name of Employer Occupation  
The Roehr Agency Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2700**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 25 / 2015**

**Transaction ID : A-CF7526**

Amount of Each Receipt this Period  
**2700**

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

Mailing Address 133 Duddington Place SE

City State Zip Code  
Washington DC 20003

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

Name of Employer Occupation  
Nathanson & Hauck Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 28 / 2015**

**Transaction ID : A-CF7529**

Amount of Each Receipt this Period  
**500**

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

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

**3450.00**

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

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

FOR LINE NUMBER: PAGE 59 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Joyce Farmer**

Mailing Address 8525 Fox Cub Lane

City State Zip Code  
Cincinnati OH 45243-1023

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2015**

**Transaction ID : A-CF7558**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Joyce Farmer**

Mailing Address 8525 Fox Cub Lane

City State Zip Code  
Cincinnati OH 45243-1023

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2015**

**Transaction ID : A-CF7559**

Amount of Each Receipt this Period  
**100**

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

Mailing Address 8011 Witts Mill Lane

City State Zip Code  
Cincinnati OH 45255-5737

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2015**

**Transaction ID : A-CF7545**

Amount of Each Receipt this Period  
**150**

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

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

**350.00**

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

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

FOR LINE NUMBER: PAGE 60 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ermelinda D Oppenheim**

Mailing Address 1346 Suncrest Drive

City State Zip Code  
Cincinnati OH 45208-2513

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

Name of Employer Occupation Information Requested  
Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**225**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 30 2015**

**Transaction ID : A-CF7547**

Amount of Each Receipt this Period  
**75**

**B.** Full Name (Last, First, Middle Initial)  
**Judith K. Panioto**

Mailing Address 1023 Brayton Avenue

City State Zip Code  
Cincinnati OH 45215-2639

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

Name of Employer Occupation Information Requested  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 30 2015**

**Transaction ID : A-CF7557**

Amount of Each Receipt this Period  
**250**

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

Mailing Address 3836 Monets Lane

City State Zip Code  
Cincinnati OH 45241-3864

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

Name of Employer Occupation Information Requested  
UBS Financial Services, Inc. Senior Vice President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 30 2015**

**Transaction ID : A-CF7556**

Amount of Each Receipt this Period  
**2000**

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

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

**2325.00**

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

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

FOR LINE NUMBER: PAGE 61 OF 108  
(check only one)  
 11a 12   
  11b 13a   
  11c 13b   
  11d 14   
  15

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Geraldine Warner**

Mailing Address 8880 Old Indian Hill Road

City State Zip Code  
Cincinnati OH 45243-3726

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**2700**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 30 / 2015**

**Transaction ID : A-CF7533**

Amount of Each Receipt this Period  
**2700**

**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)

Election Cycle-to-Date

Date of Receipt  
 M M M / D 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)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

**2700.00**

**147780.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 108
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lockheed Martin Corporation Employees' Political Action Committee**

Mailing Address 2121 Crystal Drive  
Suite 100

City State Zip Code  
Arlington VA 22202-3706

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 07 / 2015

**Transaction ID : A-CF7122**

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**Toyota Motor North America Inc PAC (Toyota/Lexus PAC)**

Mailing Address 601 Thirteenth Street NW  
Suite 910 S

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00542365

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 07 / 2015

**Transaction ID : A-CF7123**

Amount of Each Receipt this Period  
1000

**C.** Full Name (Last, First, Middle Initial)  
**Cincinnati Bell, Inc. Federal PAC**

Mailing Address PO Box 2301  
221 East 4th Street

City State Zip Code  
Cincinnati OH 45201-2301

FEC ID number of contributing federal political committee. **C** C00087478

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 08 / 2015

**Transaction ID : A-CF7131**

Amount of Each Receipt this Period  
1000

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 108
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**USEC, Inc. Political Action Committee (Centrus Energy Corp PAC)**

Mailing Address 6903 Rockledge Drive  
Floor 4

City State Zip Code  
Bethesda MD 20817-1818

FEC ID number of contributing federal political committee. **C** C00355719

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 20 / 2015

**Transaction ID : A-CF7155**

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**Cheniere Energy, Inc. PAC**

Mailing Address 1445 Pennsylvania Avenue NW  
Suite 550

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00430157

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 11 / 2015

**Transaction ID : A-CF7215**

Amount of Each Receipt this Period  
1000

**C.** Full Name (Last, First, Middle Initial)  
**Deloitte Political Action Committee**

Mailing Address PO Box 365

City State Zip Code  
Washington DC 20044-0365

FEC ID number of contributing federal political committee. **C** C00211318

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 11 / 2015

**Transaction ID : A-CF7210**

Amount of Each Receipt this Period  
5000

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 108
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Express Scripts Inc. Political Action Committee**

Mailing Address One Express Way

City St Louis State MO Zip Code 63121

FEC ID number of contributing federal political committee. **C** C00365072

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 7500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 11 / 2015

**Transaction ID : A-CF7217**

Amount of Each Receipt this Period  
 2500

**B.** Full Name (Last, First, Middle Initial)  
**National Association of Home Builders PAC (BUILD PAC)**

Mailing Address 1201 15th Street NW

City Washington State DC Zip Code 20005-2842

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 11 / 2015

**Transaction ID : A-CF7216**

Amount of Each Receipt this Period  
 1000

**C.** Full Name (Last, First, Middle Initial)  
**Toyota Motor North America Inc PAC (Toyota/Lexus PAC)**

Mailing Address 601 Thirteenth Street NW Suite 910 S

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00542365

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 11 / 2015

**Transaction ID : A-CF7212**

Amount of Each Receipt this Period  
 1000

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

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

4500.00



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

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

FOR LINE NUMBER: PAGE 65 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A. Consumer Credit Industry Association CCIA PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6300 Power Ferry Road  
 City Atlanta State GA Zip Code 30339  
 FEC ID number of contributing federal political committee. **C C00550483**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 14 / 2015  
**Transaction ID : A-CF7232**  
 Amount of Each Receipt this Period  
 1000

**B. Fluor Corporation Political Action Committee**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 403 E Capitol Street SE  
 City Washington State DC Zip Code 20003-3810  
 FEC ID number of contributing federal political committee. **C C00034132**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 14 / 2015  
**Transaction ID : A-CF7230**  
 Amount of Each Receipt this Period  
 1000

**C. Humana, Inc. PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 975 F Street NW Suite 550  
 City Washington State DC Zip Code 20004-1458  
 FEC ID number of contributing federal political committee. **C C00271007**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 14 / 2015  
**Transaction ID : A-CF7231**  
 Amount of Each Receipt this Period  
 1000

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 66 OF 108
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A. McKesson Corporation Employees Political Fund**

Full Name (Last, First, Middle Initial)  
Mailing Address 1 Post Street  
Floor 34  
City San Francisco State CA Zip Code 94104-5238

FEC ID number of contributing federal political committee. **C** C00108035

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 14 / 2015

**Transaction ID : A-CF7228**

Amount of Each Receipt this Period  
5000

**B. GCNK Apt Assn OH PAC 739**

Full Name (Last, First, Middle Initial)  
Mailing Address 7265 Kenwood Road Suite #100  
City Cincinnati State OH Zip Code 45236

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 21 / 2015

**Transaction ID : A-CF7322**

Amount of Each Receipt this Period  
250  
State PAC, Federally Permissible Funds

**C. Lockheed Martin Corporation Employees' Political Action Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 2121 Crystal Drive  
Suite 100  
City Arlington State VA Zip Code 22202-3706

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 21 / 2015

**Transaction ID : A-CF7323**

Amount of Each Receipt this Period  
1000

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

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

6250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 108
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A. American Bankers Association PAC (BANKPAC)**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1120 Connecticut Avenue NW  
 Suite 600  
 City Washington State DC Zip Code 20036-3971  
 FEC ID number of contributing federal political committee. **C C00004275**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **4000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2015  
**Transaction ID : A-CF7419**  
 Amount of Each Receipt this Period  
 2000

**B. American Society of Anesthesiologists PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1061 American Lane  
 City Schaumburg State IL Zip Code 60173  
 FEC ID number of contributing federal political committee. **C C00255752**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2015  
**Transaction ID : A-CF7383**  
 Amount of Each Receipt this Period  
 1000

**C. Buckeye Patriot Political Action Committee**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1936 Wedgewood Circle  
 City Springfield State OH Zip Code 45503  
 FEC ID number of contributing federal political committee. **C C00239905**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2015  
**Transaction ID : A-CF7423**  
 Amount of Each Receipt this Period  
 1000

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 108
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A. Building America's Republican Representation PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 651374

City Potomac Falls State VA Zip Code 20165

FEC ID number of contributing federal political committee. **C C00572271**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2015

**Transaction ID : A-CF7384**

Amount of Each Receipt this Period  
 1000

**B. Squire Patton Boggs PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 2550 M Street NW

City Washington State DC Zip Code 20037

FEC ID number of contributing federal political committee. **C C00401083**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2015

**Transaction ID : A-CF7386**

Amount of Each Receipt this Period  
 1000

**C. The Freedom Project**

Full Name (Last, First, Middle Initial)  
Mailing Address 320 1st Street SE

City Washington State DC Zip Code 20003-1838

FEC ID number of contributing federal political committee. **C C00305805**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 03 / 2015

**Transaction ID : A-CF7366**

Amount of Each Receipt this Period  
 5000

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 108
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**ABBVIE PAC**

Mailing Address 1 North Waukegan Road

City North Chicago State IL Zip Code 60064

FEC ID number of contributing federal political committee. **C** C00536573

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2015

**Transaction ID : A-CF7486**

Amount of Each Receipt this Period  
 1000

**B.** Full Name (Last, First, Middle Initial)  
**National Emergency Medicine PAC (NEMPAC)**

Mailing Address PO Box 619911

City Dallas State TX Zip Code 75261-9911

FEC ID number of contributing federal political committee. **C** C00140061

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2015

**Transaction ID : A-CF7492**

Amount of Each Receipt this Period  
 1000

**C.** Full Name (Last, First, Middle Initial)  
**Society for Vascular Surgery PAC**

Mailing Address 633 N Saint Clair Street  
Floor 22

City Chicago State IL Zip Code 60611-5098

FEC ID number of contributing federal political committee. **C** C00381459

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2015

**Transaction ID : A-CF7485**

Amount of Each Receipt this Period  
 2000

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 108
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A. Duke Energy Corporation PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 550 S Tryon Street  
 City State Zip Code  
 Charlotte NC 28202-4200  
 FEC ID number of contributing federal political committee. **C C00083535**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
**4000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 18 / 2015  
**Transaction ID : A-CF7524**  
 Amount of Each Receipt this Period  
**1000**

**B. Pharmaceutical Care Management Assn PAC (PCMA PAC)**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 601 Pennsylvania Avenue NW  
 Suite 740  
 City State Zip Code  
 Washington DC 20001  
 FEC ID number of contributing federal political committee. **C C00388819**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 18 / 2015  
**Transaction ID : A-CF7523**  
 Amount of Each Receipt this Period  
**500**

**C. Employees of Northrop Grumman Corporation PAC (ENGPAC)**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2980 Fairview Park Drive  
 City State Zip Code  
 Falls Church VA 22042-4511  
 FEC ID number of contributing federal political committee. **C C00088591**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
**3500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2015  
**Transaction ID : A-CF7527**  
 Amount of Each Receipt this Period  
**2500**

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

**4000.00**

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

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

FOR LINE NUMBER: PAGE 71 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**PricewaterhouseCoopers PAC**

Mailing Address 600 13th Street NW  
Suite 1000

City Washington State DC Zip Code 20005-3005

FEC ID number of contributing federal political committee. **C C00107235**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2015

**Transaction ID : A-CF7528**

Amount of Each Receipt this Period  
 1000

**B.** Full Name (Last, First, Middle Initial)  
**APMA Political Action Committee**

Mailing Address 9312 Old Georgetown Road

City Bethesda State MD Zip Code 20814-1621

FEC ID number of contributing federal political committee. **C C00008839**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : A-CF7544**

Amount of Each Receipt this Period  
 5000

**C.** Full Name (Last, First, Middle Initial)  
**APMA Political Action Committee**

Mailing Address 9312 Old Georgetown Road

City Bethesda State MD Zip Code 20814-1621

FEC ID number of contributing federal political committee. **C C00008839**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : A-CF7546**

Amount of Each Receipt this Period  
 5000

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

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

11000.00

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

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

FOR LINE NUMBER: PAGE 72 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Emerson Electric Co. Responsible Government Fund**

Mailing Address 8000 West Florissant Avenue  
Station 2310

City Saint Louis State MO Zip Code 63136

FEC ID number of contributing federal political committee. **C** C00080515

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : A-CF7555**

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**Express Scripts Inc. Political Action Committee**

Mailing Address One Express Way

City St Louis State MO Zip Code 63121

FEC ID number of contributing federal political committee. **C** C00365072

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7500

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : A-CF7553**

Amount of Each Receipt this Period  
2500

**C.** Full Name (Last, First, Middle Initial)  
**Express Scripts Inc. Political Action Committee**

Mailing Address One Express Way

City St Louis State MO Zip Code 63121

FEC ID number of contributing federal political committee. **C** C00365072

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7500

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : A-CF7554**

Amount of Each Receipt this Period  
2500

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

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

6000.00



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

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

FOR LINE NUMBER: PAGE 73 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Holland & Knight Committee for Effective Government**

Mailing Address 800 17th Street NW  
Suite 1100

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00171330

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : A-CF7549**

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**NRA Political Victory Fund**

Mailing Address 11250 Waples Mill Road

City State Zip Code  
Fairfax VA 22030-7550

FEC ID number of contributing federal political committee. **C** C00053553

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : A-CF7551**

Amount of Each Receipt this Period  
1000

**C.** Full Name (Last, First, Middle Initial)  
**United Technologies Corporation Political Action Committee**

Mailing Address 1101 Pennsylvania Avenue NW  
Floor 10

City State Zip Code  
Washington DC 20004-2566

FEC ID number of contributing federal political committee. **C** C00035683

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : A-CF7543**

Amount of Each Receipt this Period  
2000

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

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

4000.00

63750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 108			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2015
Mailing Address 4905 Del Ray Avenue		Amount of Each Disbursement this Period 2629.64
City Bethesda	State MD	
Zip Code 20814-2527	Purpose of Disbursement SEE MEMO ITEMS	<b>Transaction ID : B-E-7115</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2015
Mailing Address 4905 Del Ray Avenue		Amount of Each Disbursement this Period 2000
City Bethesda	State MD	
Zip Code 20814-2527	Purpose of Disbursement Compliance Consulting	<b>Transaction ID : B-S-3141</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Campaign Financial Services(07/08/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2015
Mailing Address 4905 Del Ray Avenue		Amount of Each Disbursement this Period 125
City Bethesda	State MD	
Zip Code 20814-2527	Purpose of Disbursement General Office Supplies	<b>Transaction ID : B-S-3142</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Campaign Financial Services(07/08/15)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2629.64
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 75 OF 108	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Federal Express</b>		Date of Disbursement MM / DD / YYYY 07 / 08 / 2015
Mailing Address 3610 Hacks Cross Road		Amount of Each Disbursement this Period 90.64
City Memphis	State TN Zip Code 38125	
Purpose of Disbursement Express Shipping	Category/Type 001	<b>Transaction ID : B-S-3143</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Campaign Financial Services(07/08/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Campaign Financial Services</b>		Date of Disbursement MM / DD / YYYY 07 / 08 / 2015
Mailing Address 4905 Del Ray Avenue		Amount of Each Disbursement this Period 414
City Bethesda	State MD Zip Code 20814-2527	
Purpose of Disbursement E-Merchant Fees	Category/Type 001	<b>Transaction ID : B-S-3144</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Campaign Financial Services(07/08/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Communications Counsel, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 08 / 2015
Mailing Address 37 W Broad Street Suite 325		Amount of Each Disbursement this Period 3000
City Columbus	State OH Zip Code 43215-4184	
Purpose of Disbursement Strategic Campaign Consulting	Category/Type 001	<b>Transaction ID : B-E-7116</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 108			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Montgomery Inn, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2015
Mailing Address 9406 Main Street		Amount of Each Disbursement this Period 2572.42
City Cincinnati	State OH	
Zip Code 45242-7616	Purpose of Disbursement Catering	Transaction ID : B-E-7117
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2015
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 189.66
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement E-Merchant Fees	Transaction ID : B-E-7134
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. The Lukens Company</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2015
Mailing Address 2800 S Shirlington Road Floor 9		Amount of Each Disbursement this Period 6098.41
City Arlington	State VA	
Zip Code 22206-3601	Purpose of Disbursement Direct Mail	Transaction ID : B-E-7118
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8860.49
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 77 OF 108	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. The Townsend Group</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2015
Mailing Address 1006 Pendleton Street		Amount of Each Disbursement this Period 2592.07
City Alexandria	State VA Zip Code 22314-1837	
Purpose of Disbursement SEE MEMO ITEMS	Category/Type 003	<b>Transaction ID : B-E-7135</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Original vendors exceeding reporting threshold itemized as memo transactions.

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2015
Mailing Address 300 1 St Street SE		Amount of Each Disbursement this Period 70.07
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Food & Beverage	Category/Type 003	<b>Transaction ID : B-S-3145</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>[MEMO ITEM]</b> Subitemization of The Townsend Group(07/10/15)

Full Name (Last, First, Middle Initial) <b>c. The Townsend Group</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2015
Mailing Address 1006 Pendleton Street		Amount of Each Disbursement this Period 2500
City Alexandria	State VA Zip Code 22314-1837	
Purpose of Disbursement Fundraising Consulting	Category/Type 003	<b>Transaction ID : B-S-3146</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>[MEMO ITEM]</b> Subitemization of The Townsend Group(07/10/15)

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2592.07
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 108			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. PNC Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2015
Mailing Address PO Box 856177		Amount of Each Disbursement this Period 386.17
City Louisville State KY Zip Code 40285	Purpose of Disbursement SEE MEMO ITEMS	
Candidate Name	Category/Type 001	Transaction ID : B-E-7142
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		Original vendors exceeding reporting threshold itemized as memo transactions.

Full Name (Last, First, Middle Initial) <b>B. Wal-Mart</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2015
Mailing Address 4000 Red Bank Drive		Amount of Each Disbursement this Period 213.28
City Cincinnati State OH Zip Code 45227	Purpose of Disbursement General Office Supplies	
Candidate Name	Category/Type 001	Transaction ID : B-S-3150
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		[MEMO ITEM] Subitemization of PNC Bank(07/20/15)

Full Name (Last, First, Middle Initial) <b>c. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2015
Mailing Address 300 1 St Street SE		Amount of Each Disbursement this Period 37.2
City Washington State DC Zip Code 20003	Purpose of Disbursement Meal Expense	
Candidate Name	Category/Type 001	Transaction ID : B-S-3151
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		[MEMO ITEM] Subitemization of PNC Bank(07/20/15)

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	386.17
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 108			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. 125 Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2015
Mailing Address 1958 Ohio 125		Amount of Each Disbursement this Period 32.03
City Amelia	State OH	
Zip Code 45102	Purpose of Disbursement Storage	<b>Transaction ID : B-S-3149</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of PNC Bank(07/20/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Maggie Wuellner</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2015
Mailing Address 3422 Custer Avenue		Amount of Each Disbursement this Period 2500
City Cincinnati	State OH	
Zip Code 45208-2529	Purpose of Disbursement Fundraising Consulting	<b>Transaction ID : B-E-7141</b>
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2015
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement E-Merchant Fees	<b>Transaction ID : B-E-7172</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2575.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 108			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Brad Wenstrup</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2015
Mailing Address 512 Missouri Avenue		Amount of Each Disbursement this Period 272.6 <b>Transaction ID : B-E-7143</b>
City Cincinnati	State OH Zip Code 45226-1121	
Purpose of Disbursement Reimbursement - Flags	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The Fountain Square Group LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2015
Mailing Address 630 Vine Street Suite 805		Amount of Each Disbursement this Period 1500 <b>Transaction ID : B-E-7145</b>
City Cincinnati	State OH Zip Code 45202-2441	
Purpose of Disbursement Fundraising Consulting	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2015
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 30 <b>Transaction ID : B-E-7173</b>
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement E-Merchant Fees	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1802.60
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 108			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Clermont County Senior Fair Board</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2015	
Mailing Address 4228 Long Lake Drive Unit 11307			Amount of Each Disbursement this Period 500	
City Batavia	State OH	Zip Code 45103-9199	Transaction ID : B-E-7168	
Purpose of Disbursement Advertising		Category/ Type 004		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Saba Direct</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2015	
Mailing Address 7311 Grove Road Unit G			Amount of Each Disbursement this Period 816.48	
City Frederick	State MD	Zip Code 21704	Transaction ID : B-E-7164	
Purpose of Disbursement Postage		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Piryx, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2015	
Mailing Address 144 2nd Street 1st Floor			Amount of Each Disbursement this Period 3	
City San Francisco	State CA	Zip Code 94105	Transaction ID : B-E-7175	
Purpose of Disbursement E-Merchant Fees		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1319.48
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 108			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Aristotle International</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2015
Mailing Address 205 Pennsylvania Avenue SE			Amount of Each Disbursement this Period 1950 <b>Transaction ID : B-E-7176</b>
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement Software Service		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>B. Paycor, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2015
Mailing Address 644 Linn Street Suite 200			Amount of Each Disbursement this Period 89.23 <b>Transaction ID : B-E-7191</b>
City Cincinnati	State OH	Zip Code 45203-1734	
Purpose of Disbursement Payroll Taxes		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>c. Paycor, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2015
Mailing Address 644 Linn Street Suite 200			Amount of Each Disbursement this Period 56.71 <b>Transaction ID : B-E-7192</b>
City Cincinnati	State OH	Zip Code 45203-1734	
Purpose of Disbursement Payroll Fees		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2095.94
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 108			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paycor, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 30 / 2015
Mailing Address 644 Linn Street Suite 200		Amount of Each Disbursement this Period 459.02
City Cincinnati	State OH	
Zip Code 45203-1734	Purpose of Disbursement SEE MEMO ITEMS	<b>Transaction ID : B-E-7193</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kyle Kirker</b>		Date of Disbursement MM / DD / YYYY 07 / 30 / 2015
Mailing Address PO Box 9551		Amount of Each Disbursement this Period 459.02
City Cincinnati	State OH	
Zip Code 45209	Purpose of Disbursement Payroll	<b>Transaction ID : B-S-3155</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Paycor, Inc.(07/30/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 30 / 2015
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 1.5
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement E-Merchant Fees	<b>Transaction ID : B-E-7189</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	460.52
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 108			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Peerless Printing Company</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2015
Mailing Address 2250 Gilbert Avenue		Amount of Each Disbursement this Period 1193.36
City Cincinnati	State OH Zip Code 45206	
Purpose of Disbursement Printing	Category/Type 003	<b>Transaction ID : B-E-7195</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2015
Mailing Address 4905 Del Ray Avenue		Amount of Each Disbursement this Period 2666.28
City Bethesda	State MD Zip Code 20814-2527	
Purpose of Disbursement SEE MEMO ITEMS	Category/Type 001	<b>Transaction ID : B-E-7199</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2015
Mailing Address 4905 Del Ray Avenue		Amount of Each Disbursement this Period 2000
City Bethesda	State MD Zip Code 20814-2527	
Purpose of Disbursement Compliance Consulting	Category/Type 001	<b>Transaction ID : B-S-3156</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Campaign Financial Services(08/13/15)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3859.64
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 108			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Campaign Financial Services</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2015
Mailing Address 4905 Del Ray Avenue		Amount of Each Disbursement this Period 125
City Bethesda	State MD	
Zip Code 20814-2527	Purpose of Disbursement General Office Supplies	<b>Transaction ID : B-S-3157</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Campaign Financial Services(08/13/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Federal Express</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2015
Mailing Address 3610 Hacks Cross Road		Amount of Each Disbursement this Period 78
City Memphis	State TN	
Zip Code 38125	Purpose of Disbursement Express Shipping	<b>Transaction ID : B-S-3158</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Campaign Financial Services(08/13/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Campaign Financial Services</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2015
Mailing Address 4905 Del Ray Avenue		Amount of Each Disbursement this Period 463.28
City Bethesda	State MD	
Zip Code 20814-2527	Purpose of Disbursement E-Merchant Fees	<b>Transaction ID : B-S-3159</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Campaign Financial Services(08/13/15)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 86 OF 108	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Maggie Wuellner</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2015
Mailing Address 3422 Custer Avenue		Amount of Each Disbursement this Period 528.21
City Cincinnati	State OH Zip Code 45208-2529	
Purpose of Disbursement SEE MEMO ITEMS	Category/Type 003	<b>Transaction ID : B-E-7200</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Original vendors exceeding reporting threshold itemized as memo transactions.

Full Name (Last, First, Middle Initial) <b>B. United States Postal Service</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2015
Mailing Address 3874 Paxton Avenue		Amount of Each Disbursement this Period 102
City Cincinnati	State OH Zip Code 45209	
Purpose of Disbursement PO Box Fee	Category/Type 001	<b>Transaction ID : B-S-3160</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>[MEMO ITEM]</b> Subitemization of Maggie Wuellner(08/13/15)

Full Name (Last, First, Middle Initial) <b>c. United States Postal Service</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2015
Mailing Address 3874 Paxton Avenue		Amount of Each Disbursement this Period 70.56
City Cincinnati	State OH Zip Code 45209	
Purpose of Disbursement Postage	Category/Type 001	<b>Transaction ID : B-S-3161</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>[MEMO ITEM]</b> Subitemization of Maggie Wuellner(08/13/15)

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	528.21
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 108			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Delaware North Companies, Inc.</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2015
Mailing Address 100 Joe Nuxhall Way		Amount of Each Disbursement this Period 208.65
City Cincinnati	State OH Zip Code 45202	
Purpose of Disbursement Gifts & Mementos	Category/Type 006	<b>Transaction ID : B-S-3162</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Maggie Wuellner(08/13/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. United States Postal Service</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2015
Mailing Address 3874 Paxton Avenue		Amount of Each Disbursement this Period 147
City Cincinnati	State OH Zip Code 45209	
Purpose of Disbursement Postage	Category/Type 001	<b>Transaction ID : B-S-3163</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Maggie Wuellner(08/13/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Maggie Wuellner</b>		Date of Disbursement MM / DD / YYYY 08 / 14 / 2015
Mailing Address 3422 Custer Avenue		Amount of Each Disbursement this Period 2500
City Cincinnati	State OH Zip Code 45208-2529	
Purpose of Disbursement Fundraising Consulting	Category/Type 003	<b>Transaction ID : B-E-7222</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 108			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Maggie Wuellner</b>		Date of Disbursement MM / DD / YYYY 08 / 14 / 2015
Mailing Address 3422 Custer Avenue		Amount of Each Disbursement this Period -2500 <b>Transaction ID : B-E-7223</b>
City Cincinnati	State OH	
Zip Code 45208-2529	Purpose of Disbursement Voided 7/20, Lost Check, see reissue 8/14: Fundraising Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The Townsend Group</b>		Date of Disbursement MM / DD / YYYY 08 / 17 / 2015
Mailing Address 1006 Pendleton Street		Amount of Each Disbursement this Period 2596 <b>Transaction ID : B-E-7225</b>
City Alexandria	State VA	
Zip Code 22314-1837	Purpose of Disbursement SEE MEMO ITEMS	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		Original vendors exceeding reporting threshold itemized as memo transactions.

Full Name (Last, First, Middle Initial) <b>c. Capitol Hill Club</b>		Date of Disbursement MM / DD / YYYY 08 / 17 / 2015
Mailing Address 300 1 St Street SE		Amount of Each Disbursement this Period 96 <b>Transaction ID : B-S-3165</b>
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Parking	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		<b>[MEMO ITEM]</b> Subitemization of The Townsend Group(08/17/15)

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	96.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 108			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. The Townsend Group</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2015
Mailing Address 1006 Pendleton Street		Amount of Each Disbursement this Period 2500
City Alexandria	State VA	
Zip Code 22314-1837	Purpose of Disbursement Fundraising Consulting	Transaction ID : B-S-3164
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of The Townsend Group(08/17/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2015
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 1.5
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement E-Merchant Fees	Transaction ID : B-E-7263
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. PNC Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2015
Mailing Address PO Box 856177		Amount of Each Disbursement this Period 1275.85
City Louisville	State KY	
Zip Code 40285	Purpose of Disbursement SEE MEMO ITEMS	Transaction ID : B-E-7264
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1277.35
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 90 OF 108	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Orlando World Center Marriott</b>		Date of Disbursement MM / DD / YYYY 08 / 20 / 2015
Mailing Address 8701 World Center Drive		Amount of Each Disbursement this Period 217.13
City Orlando	State FL Zip Code 32821-6358	
Purpose of Disbursement Lodging	Category/Type 002	<b>Transaction ID : B-S-3169</b>  <b>[MEMO ITEM]</b> Subitemization of PNC Bank(08/20/15)
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JetBlue Airways</b>		Date of Disbursement MM / DD / YYYY 08 / 20 / 2015
Mailing Address 2701 Queens Plaza N		Amount of Each Disbursement this Period 321.1
City Long Island City	State NY Zip Code 11101-4020	
Purpose of Disbursement Airfare	Category/Type 002	<b>Transaction ID : B-S-3173</b>  <b>[MEMO ITEM]</b> Subitemization of PNC Bank(08/20/15)
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. United States Postal Service</b>		Date of Disbursement MM / DD / YYYY 08 / 20 / 2015
Mailing Address 3874 Paxton Avenue		Amount of Each Disbursement this Period 13.05
City Cincinnati	State OH Zip Code 45209	
Purpose of Disbursement Postage	Category/Type 001	<b>Transaction ID : B-S-3174</b>  <b>[MEMO ITEM]</b> Subitemization of PNC Bank(08/20/15)
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 108			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2015
Mailing Address 3874 Paxton Avenue		Amount of Each Disbursement this Period 49
City Cincinnati	State OH Zip Code 45209	
Purpose of Disbursement Express Shipping	Category/Type 001	<b>Transaction ID : B-S-3170</b>  <b>[MEMO ITEM]</b> Subitemization of PNC Bank(08/20/15)
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. 125 Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2015
Mailing Address 1958 Ohio 125		Amount of Each Disbursement this Period 32.03
City Amelia	State OH Zip Code 45102	
Purpose of Disbursement Storage	Category/Type 001	<b>Transaction ID : B-S-3171</b>  <b>[MEMO ITEM]</b> Subitemization of PNC Bank(08/20/15)
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Maggie Wuellner</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2015
Mailing Address 3422 Custer Avenue		Amount of Each Disbursement this Period 2500
City Cincinnati	State OH Zip Code 45208-2529	
Purpose of Disbursement Fundraising Consulting	Category/Type 003	<b>Transaction ID : B-E-7265</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 108			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2015
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 13.5 <b>Transaction ID : B-E-7281</b>
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement E-Merchant Fees	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The Fountain Square Group LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 24 / 2015
Mailing Address 630 Vine Street Suite 805		Amount of Each Disbursement this Period 1500 <b>Transaction ID : B-E-7278</b>
City Cincinnati	State OH Zip Code 45202-2441	
Purpose of Disbursement Fundraising Consulting	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2015
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 15 <b>Transaction ID : B-E-7327</b>
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement E-Merchant Fees	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1528.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 108			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Piryx, Inc.</b>		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period ..... 15
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement E-Merchant Fees	Category/Type 001	<b>Transaction ID : B-E-7329</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Paycor, Inc.</b>		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address 644 Linn Street Suite 200		Amount of Each Disbursement this Period ..... 459.02
City Cincinnati	State OH Zip Code 45203-1734	
Purpose of Disbursement SEE MEMO ITEMS	Category/Type 001	<b>Transaction ID : B-E-7348</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Kyle Kirker</b>		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address PO Box 9551		Amount of Each Disbursement this Period ..... 459.02
City Cincinnati	State OH Zip Code 45209	
Purpose of Disbursement Payroll	Category/Type 001	<b>Transaction ID : B-S-3177</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Paycor, Inc.(08/28/15)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	..... 474.02
<b>TOTAL</b> This Period (last page this line number only).....	.....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 108			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paycor, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2015
Mailing Address 644 Linn Street Suite 200		Amount of Each Disbursement this Period 89.23
City Cincinnati	State OH Zip Code 45203-1734	
Purpose of Disbursement Payroll Taxes	Category/Type 001	<b>Transaction ID : B-E-7349</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Paycor, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2015
Mailing Address 644 Linn Street Suite 200		Amount of Each Disbursement this Period 56.71
City Cincinnati	State OH Zip Code 45203-1734	
Purpose of Disbursement Payroll Fees	Category/Type 001	<b>Transaction ID : B-E-7350</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2015
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 3
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement E-Merchant Fees	Category/Type 001	<b>Transaction ID : B-E-7334</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	148.94
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 108			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2015
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 1.5 <b>Transaction ID : B-E-7342</b>
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement E-Merchant Fees	001 Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2015
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 162 <b>Transaction ID : B-E-7347</b>
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement E-Merchant Fees	001 Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2015
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 16.5 <b>Transaction ID : B-E-7351</b>
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement E-Merchant Fees	001 Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	180.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 108			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Piryx, Inc.</b>		Date of Disbursement MM / DD / YYYY 09 / 09 / 2015
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 6136.49
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement E-Merchant Fees	Category/Type 001	Transaction ID : B-E-7464
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Maggie Wuellner</b>		Date of Disbursement MM / DD / YYYY 09 / 10 / 2015
Mailing Address 3422 Custer Avenue		Amount of Each Disbursement this Period 6121.19
City Cincinnati	State OH Zip Code 45208-2529	
Purpose of Disbursement SEE MEMO ITEMS	Category/Type 003	Transaction ID : B-E-7462
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Funky's Catering</b>		Date of Disbursement MM / DD / YYYY 09 / 10 / 2015
Mailing Address 1781 Tennessee Avenue		Amount of Each Disbursement this Period 3621
City Cincinnati	State OH Zip Code 45229	
Purpose of Disbursement Catering	Category/Type 003	Transaction ID : B-S-3179
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Maggie Wuellner(09/10/15)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6136.49
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 108			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Fedex Office</b>		Date of Disbursement MM / DD / YYYY 09 / 10 / 2015
Mailing Address 3876 Paxton Avenue		Amount of Each Disbursement this Period 255.19
City Cincinnati	State OH	
Zip Code 45209	Purpose of Disbursement Printing	Transaction ID : B-S-3178
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Maggie Wuellner(09/10/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Prestige Valet, Inc.</b>		Date of Disbursement MM / DD / YYYY 09 / 10 / 2015
Mailing Address 5157 Valley Ridge		Amount of Each Disbursement this Period 445
City Cincinnati	State OH	
Zip Code 45247	Purpose of Disbursement Valet Parking Service	Transaction ID : B-S-3180
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Maggie Wuellner(09/10/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Eric Chapman's</b>		Date of Disbursement MM / DD / YYYY 09 / 10 / 2015
Mailing Address 1636 Jonathan Avenue		Amount of Each Disbursement this Period 1800
City Cincinnati	State OH	
Zip Code 45207	Purpose of Disbursement Catering	Transaction ID : B-S-3181
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Maggie Wuellner(09/10/15)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 108			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. The Lukens Company</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2015
Mailing Address 2800 S Shirlington Road Floor 9		Amount of Each Disbursement this Period 6113.79
City Arlington	State VA	
Zip Code 22206-3601	Purpose of Disbursement Printing	<b>Transaction ID : B-E-7463</b>
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2015
Mailing Address 4905 Del Ray Avenue		Amount of Each Disbursement this Period 2887.41
City Bethesda	State MD	
Zip Code 20814-2527	Purpose of Disbursement SEE MEMO ITEMS	<b>Transaction ID : B-E-7468</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2015
Mailing Address 4905 Del Ray Avenue		Amount of Each Disbursement this Period 125
City Bethesda	State MD	
Zip Code 20814-2527	Purpose of Disbursement General Office Supplies	<b>Transaction ID : B-S-3183</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Campaign Financial Services(09/15/15)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9001.20
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 99 OF 108	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2015
Mailing Address 4905 Del Ray Avenue		Amount of Each Disbursement this Period 2000
City Bethesda	State MD	
Zip Code 20814-2527	Purpose of Disbursement Compliance Consulting	<b>Transaction ID : B-S-3182</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Campaign Financial Services(09/15/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Federal Express</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2015
Mailing Address 3610 Hacks Cross Road		Amount of Each Disbursement this Period 94.91
City Memphis	State TN	
Zip Code 38125	Purpose of Disbursement Express Shipping	<b>Transaction ID : B-S-3184</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Campaign Financial Services(09/15/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2015
Mailing Address 4905 Del Ray Avenue		Amount of Each Disbursement this Period 616.5
City Bethesda	State MD	
Zip Code 20814-2527	Purpose of Disbursement E-Merchant Fee	<b>Transaction ID : B-S-3186</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Campaign Financial Services(09/15/15)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 100 OF 108	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Communications Counsel, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>09 / 15 / 2015</b>
Mailing Address <b>37 W Broad Street Suite 325</b>		Amount of Each Disbursement this Period <b>2000</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215-4184</b>
Purpose of Disbursement <b>Strategic Campaign Consulting</b>	Category/Type <b>001</b>	
Candidate Name		<b>Transaction ID : B-E-7469</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Paycor, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>09 / 15 / 2015</b>
Mailing Address <b>644 Linn Street Suite 200</b>		Amount of Each Disbursement this Period <b>42.8</b>
City <b>Cincinnati</b>	State <b>OH</b>	Zip Code <b>45203-1734</b>
Purpose of Disbursement <b>Payroll Fees</b>	Category/Type <b>001</b>	
Candidate Name		<b>Transaction ID : B-E-7562</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>09 / 16 / 2015</b>
Mailing Address <b>144 2nd Street 1st Floor</b>		Amount of Each Disbursement this Period <b>15</b>
City <b>San Francisco</b>	State <b>CA</b>	Zip Code <b>94105</b>
Purpose of Disbursement <b>E-Merchant Fees</b>	Category/Type <b>001</b>	
Candidate Name		<b>Transaction ID : B-E-7474</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>2057.80</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 101 OF 108	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. PNC Bank</b>		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address PO Box 856177		Amount of Each Disbursement this Period 472.74
City Louisville	State KY	
Zip Code 40285	Purpose of Disbursement SEE MEMO ITEMS	<b>Transaction ID : B-E-7475</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Wal-Mart</b>		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address 4000 Red Bank Drive		Amount of Each Disbursement this Period 115.9
City Cincinnati	State OH	
Zip Code 45227	Purpose of Disbursement General Office Supplies	<b>Transaction ID : B-S-3191</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of PNC Bank(09/18/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Capitol Hill Club</b>		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address 300 1 St Street SE		Amount of Each Disbursement this Period 244.48
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Meal Expense	<b>Transaction ID : B-S-3193</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of PNC Bank(09/18/15)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	472.74
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 102 OF 108	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. 125 Storage</b>		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address 1958 Ohio 125		Amount of Each Disbursement this Period 32.03
City Amelia	State OH	
Zip Code 45102	Purpose of Disbursement Storage Fee	<b>Transaction ID : B-S-3188</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of PNC Bank(09/18/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The Fountain Square Group LLC</b>		Date of Disbursement MM / DD / YYYY 09 / 21 / 2015
Mailing Address 630 Vine Street Suite 805		Amount of Each Disbursement this Period 1500
City Cincinnati	State OH	
Zip Code 45202-2441	Purpose of Disbursement Fundraising Consulting	<b>Transaction ID : B-E-7484</b>
Candidate Name	003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. The Townsend Group</b>		Date of Disbursement MM / DD / YYYY 09 / 21 / 2015
Mailing Address 1006 Pendleton Street		Amount of Each Disbursement this Period 6122.75
City Alexandria	State VA	
Zip Code 22314-1837	Purpose of Disbursement SEE MEMO ITEMS	<b>Transaction ID : B-E-7487</b>
Candidate Name	003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7622.75
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 108			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Orlando World Center Marriott</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2015
Mailing Address 8701 World Center Drive		Amount of Each Disbursement this Period 2237.78
City Orlando	State FL Zip Code 32821-6358	
Purpose of Disbursement Catering	Category/Type 003	<b>Transaction ID : B-S-3198</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of The Townsend Group(09/21/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The Townsend Group</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2015
Mailing Address 1006 Pendleton Street		Amount of Each Disbursement this Period 2500
City Alexandria	State VA Zip Code 22314-1837	
Purpose of Disbursement Fundraising Consulting	Category/Type 003	<b>Transaction ID : B-S-3194</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of The Townsend Group(09/21/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2015
Mailing Address 300 1 St Street SE		Amount of Each Disbursement this Period 482.32
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Catering	Category/Type 003	<b>Transaction ID : B-S-3195</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of The Townsend Group(09/21/15)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 108			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2015
Mailing Address 300 1 St Street SE		Amount of Each Disbursement this Period 48
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Parking Fee	<b>Transaction ID : B-S-3196</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of The Townsend Group(09/21/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Acqua AI 2</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2015
Mailing Address 212 7th Street SE		Amount of Each Disbursement this Period 850.2
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Catering	<b>Transaction ID : B-S-3197</b>
Candidate Name	003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of The Townsend Group(09/21/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Maggie Wuellner</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2015
Mailing Address 3422 Custer Avenue		Amount of Each Disbursement this Period 2500
City Cincinnati	State OH	
Zip Code 45208-2529	Purpose of Disbursement Fundraising Consulting	<b>Transaction ID : B-E-7521</b>
Candidate Name	003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2500.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 108			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paycor, Inc.</b>		Date of Disbursement MM / DD / YYYY 09 / 29 / 2015
Mailing Address 644 Linn Street Suite 200		Amount of Each Disbursement this Period 89.14
City Cincinnati	State OH Zip Code 45203-1734	
Purpose of Disbursement Payroll Taxes	Category/Type 001	<b>Transaction ID : B-E-7563</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Paycor, Inc.</b>		Date of Disbursement MM / DD / YYYY 09 / 29 / 2015
Mailing Address 644 Linn Street Suite 200		Amount of Each Disbursement this Period 56.71
City Cincinnati	State OH Zip Code 45203-1734	
Purpose of Disbursement Payroll Fees	Category/Type 001	<b>Transaction ID : B-E-7564</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Paycor, Inc.</b>		Date of Disbursement MM / DD / YYYY 09 / 29 / 2015
Mailing Address 644 Linn Street Suite 200		Amount of Each Disbursement this Period 459.11
City Cincinnati	State OH Zip Code 45203-1734	
Purpose of Disbursement SEE MEMO ITEM	Category/Type 001	<b>Transaction ID : B-E-7565</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	604.96
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 108			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kyle Kirker</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2015
Mailing Address PO Box 9551		Amount of Each Disbursement this Period 459.11
City Cincinnati	State OH	
Zip Code 45209	Purpose of Disbursement Payroll	<b>Transaction ID : B-S-3202</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Paycor, Inc.(09/29/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	67210.51

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 107 OF 108	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. William Posey</b>		Date of Disbursement MM / DD / YYYY 07 / 13 / 2015
Mailing Address 3453 Fawnrun Drive		Amount of Each Disbursement this Period 2700 <b>Transaction ID : B-E-7136</b>
City Cincinnati	State OH Zip Code 45241-3856	
Purpose of Disbursement Contribution Refund	Category/Type 010	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2700.00
<b>TOTAL</b> This Period (last page this line number only).....	2700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 108 OF 108	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ohio Fallen Heroes Memorial</b>		Date of Disbursement M M / D D / Y Y Y Y <b>07 / 29 / 2015</b>
Mailing Address PO Box 92		Amount of Each Disbursement this Period <b>250</b>
City Sunbury	State OH	
Zip Code 43074-0092	Purpose of Disbursement Charitable Donation	<b>Transaction ID : B-E-7171</b>
Candidate Name	<b>012</b> Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>250.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>250.00</b>