



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
OHIOS FUTURE PAC

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		141001.79
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	168432.02									
(c) Total Receipts (from Line 19) .....	60442.00	119482.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	228874.02	260483.79								
7. Total Disbursements (from Line 31) .....	60246.55	91856.32								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	168627.47	168627.47								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
OHIOS FUTURE PAC

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	49500.00	108100.00
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	1000.00	1440.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ▶	50500.00	109540.00
(b) Political Party Committees .....	1342.00	1342.00
(c) Other Political Committees (such as PACs) .....	8600.00	8600.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ▶	60442.00	119482.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	60442.00	119482.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	60442.00	119482.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	45396.55	72006.32
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	45396.55	72006.32
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	9500.00	11500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	5350.00	8350.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	60246.55	91856.32
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	60246.55	91856.32

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	60442.00	119482.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	60442.00	119482.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	45396.55	72006.32
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	45396.55	72006.32

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

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

FOR LINE NUMBER: PAGE 6 / 42  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
OHIOS FUTURE PAC

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

Mailing Address 7796 Shawnee Run Rd

City State Zip Code  
Cincinnati OH 45243

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

Name of Employer Occupation  
Atkins & Pearce President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 2 3 / 2 0 0 8

**Transaction ID:** 80708.C338

Amount of Each Receipt this Period  
1500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Timothy Mathile

Mailing Address 1875 Keys Crescent

City State Zip Code  
Cincinnati OH 45206

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

Name of Employer Occupation  
Franklin Brazing CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 8

**Transaction ID:** 80708.C304

Amount of Each Receipt this Period  
5000.00

Receipt

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

Mailing Address 10607 Merrick Lane

City State Zip Code  
Cincinnati OH 45242

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

Name of Employer Occupation  
AK Steel Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 1 / 2 0 0 8

**Transaction ID:** 80403.C300

Amount of Each Receipt this Period  
500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **7000.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 42  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
OHIOS FUTURE PAC

**A.** Full Name (Last, First, Middle Initial)  
Andrew D. Ciafardini

Mailing Address 10838 Lakehurst Court

City State Zip Code  
Cincinnati OH 45242

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt MM / DD / YYYY  
06 / 30 / 2008

**Transaction ID:** 80713.C348

Amount of Each Receipt this Period 453.69

Memo  
**[MEMO ITEM]**  
Unreimbursed Expenses

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

Mailing Address 620 RiverCenter Tower  
50 East River Center Blvd

City State Zip Code  
Covington KY 41011

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Self-Employed Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt MM / DD / YYYY  
04 / 17 / 2008

**Transaction ID:** 80708.C306

Amount of Each Receipt this Period 5000.00

Receipt

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

Mailing Address 7154 Knoll Rd

City State Zip Code  
Cincinnati OH 45237-2526

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Jones The Florist Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt MM / DD / YYYY  
04 / 17 / 2008

**Transaction ID:** 80708.C309

Amount of Each Receipt this Period 2500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... 7500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 42
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
OHIOS FUTURE PAC

**A.** Full Name (Last, First, Middle Initial)  
Richard W. Lowrie, Jr.  
Mailing Address 400 Timberidge Trl  
City Gates Mills State OH Zip Code 44040-9712  
FEC ID number of contributing federal political committee. **C**  
Name of Employer McDonald Investments Occupation Consultant  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00  
Date of Receipt 04 / 19 / 2008  
Transaction ID: 80708.C311  
Amount of Each Receipt this Period 500.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
Willam C McCoy  
Mailing Address 36001 Shaker Blvd  
City Chagrin Falls State OH Zip Code 44022-6641  
FEC ID number of contributing federal political committee. **C**  
Name of Employer City of Chagrin Falls, OH Occupation Mayor  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 04 / 19 / 2008  
Transaction ID: 80708.C312  
Amount of Each Receipt this Period 1000.00  
Receipt

**C.** Full Name (Last, First, Middle Initial)  
Frank C. Sullivan  
Mailing Address 31177 Huntington Woods Pkwy  
City Bay Village State OH Zip Code 44140-1036  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RPM Intl Inc. Occupation President & CEO  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00  
Date of Receipt 04 / 19 / 2008  
Transaction ID: 80713.C343  
Amount of Each Receipt this Period 5000.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 6500.00  
**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 42  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
OHIOS FUTURE PAC

**A.**

Full Name (Last, First, Middle Initial)  
Richard W. Pogue

Mailing Address 901 Lakeside Ave E

City Cleveland State OH Zip Code 44114-1163

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

Name of Employer Jones Day Occupation Senior Advisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 19 / 2008

Transaction ID: 80708.C313

Amount of Each Receipt this Period 1000.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Karl Grafe

Mailing Address 8345 Arapaho Ln

City Cincinnati State OH Zip Code 45243-2717

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

Name of Employer American Financial Corporation Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 04 / 15 / 2008

Transaction ID: 80708.C314

Amount of Each Receipt this Period 750.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Donna Grafe

Mailing Address 8345 Arapaho Ln

City Cincinnati State OH Zip Code 45243-2717

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

Name of Employer None Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 04 / 15 / 2008

Transaction ID: 80708.C315

Amount of Each Receipt this Period 750.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 2500.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 42  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)  
OHIOS FUTURE PAC

**A.**

Full Name (Last, First, Middle Initial)  
Richard B Ainsworth

Mailing Address 2023 Lyndway Rd

City Cleveland State OH Zip Code 44121-4265

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

Name of Employer Glenmede Trust Company Occupation Chairman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 01 / 2008

Transaction ID: 80708.C317

Amount of Each Receipt this Period 1000.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Allen H. Ford

Mailing Address 1890 E 107th Street Apt 905

City Cleveland State OH Zip Code 44106-2252

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 01 / 2008

Transaction ID: 80708.C319

Amount of Each Receipt this Period 5000.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Edward A Lozick

Mailing Address 29425 Chagrin Blvd Ste 201

City Beachwood State OH Zip Code 44122-4602

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

Name of Employer Swagelok Company Occupation Chairman of the Board

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 07 / 2008

Transaction ID: 80708.C321

Amount of Each Receipt this Period 2500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **8500.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 42

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
OHIOS FUTURE PAC

**A.**

Full Name (Last, First, Middle Initial)  
Mary F. Cannon

Mailing Address 3366 Ardmore Rd

City State Zip Code  
Cleveland OH 44120-3404

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

Name of Employer Occupation  
None Homemaker

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 7 / 2 0 0 8

Transaction ID: 80708.C323

Amount of Each Receipt this Period

1000.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
David T Morganthaler

Mailing Address 50 Public Sq Ste 2700

City State Zip Code  
Cleveland OH 44113-2236

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

Name of Employer Occupation  
Self-Employed Venture Capitalist

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 8

Transaction ID: 80708.C324

Amount of Each Receipt this Period

2500.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
E. Thomas Arington

Mailing Address 7155 E Kemper Rd

City State Zip Code  
Cincinnati OH 45249-1028

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

Name of Employer Occupation  
Prasco Laboratories Founder

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 0 / 2 0 0 8

Transaction ID: 80708.C325

Amount of Each Receipt this Period

5000.00

Receipt

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

8500.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 42  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
OHIOS FUTURE PAC

**A.**

Full Name (Last, First, Middle Initial)  
William Conway

Mailing Address PO Box 87

City Chardon State OH Zip Code 44024-0087

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

Name of Employer Fairmount Chemicals Occupation CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 07 / 2008

Transaction ID: 80708.C326

Amount of Each Receipt this Period 1000.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Robert G. Gifford

Mailing Address 41 Oxford Rd

City Newton Center State MA Zip Code 02459-2407

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

Name of Employer Self-Employed Occupation Real Estate Investments

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 13 / 2008

Transaction ID: 80708.C327

Amount of Each Receipt this Period 1000.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
James L. Bayman

Mailing Address 1760 County Line Rd

City Gates Mills State OH Zip Code 44040-9801

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 13 / 2008

Transaction ID: 80713.C344

Amount of Each Receipt this Period 1000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3000.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 42  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
OHIOS FUTURE PAC

**A.**

Full Name (Last, First, Middle Initial) David L. Brennan		Date of Receipt MM / DD / YYYY 05 / 17 / 2008
Mailing Address 850 Nelsons Walk		Transaction ID: 80708.C331
City Naples	State FL	Zip Code 34102-7871
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Brennan Management Group	Occupation Chairman	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

**B.**

Full Name (Last, First, Middle Initial) Edgar E. Loyd		Date of Receipt MM / DD / YYYY 05 / 22 / 2008
Mailing Address 1422 Hill Crest Rd		Transaction ID: 80708.C333
City Cincinnati	State OH	Zip Code 45224-3230
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Chiquita Brands International	Occupation Investor Relations	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

**C.**

Full Name (Last, First, Middle Initial) Umberto P Fedeli, Jr		Date of Receipt MM / DD / YYYY 06 / 06 / 2008
Mailing Address 5005 Rockside Rd Fl 5		Transaction ID: 80708.C336
City Independence	State OH	Zip Code 44131-2194
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer The Fedeli Group	Occupation President & CEO	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<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 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 42  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
OHIOS FUTURE PAC

**A.**

Full Name (Last, First, Middle Initial)  
Catherine Kilbane

Mailing Address 29644 Lake Rd

City State Zip Code  
Bay Village OH 44140-1224

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

Name of Employer American Greetings Occupation Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
06 / 06 / 2008

Transaction ID: 80708.C337

Amount of Each Receipt this Period  
500.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Donald Gustavson

Mailing Address 17480 Deepview Dr

City State Zip Code  
Chagrin Falls OH 44023-1418

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

Name of Employer Lab Casework, Inc Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
04 / 19 / 2008

Transaction ID: 80708.C339

Amount of Each Receipt this Period  
1000.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Thomas J Callahan

Mailing Address 1915 Sperrys Forge Trail

City State Zip Code  
Westlake OH 44145

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

Name of Employer Thompson Hine LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
MM / DD / YYYY  
06 / 28 / 2008

Transaction ID: 80713.C345

Amount of Each Receipt this Period  
2000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **3500.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 15 / 42	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
OHIOS FUTURE PAC

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

Mailing Address 13485 N Park Blvd

City Cleveland Heights State OH Zip Code 44118-4927

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 2 8 / 2 0 0 8

Transaction ID: 80713.C346

Amount of Each Receipt this Period  
1000.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	49500.00

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

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

FOR LINE NUMBER: PAGE 16 / 42  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
OHIOS FUTURE PAC

**A.** Full Name (Last, First, Middle Initial)  
National City Corporation PAC

Mailing Address 1900 East Ninth St  
LOC 01-2157

City Cleveland State OH Zip Code 44114

FEC ID number of contributing federal political committee. **C** C00141036

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 04 / 19 / 2008  
**Transaction ID:** 80708.C310  
 Amount of Each Receipt this Period: 1000.00  
 Receipt

**B.** Full Name (Last, First, Middle Initial)  
RPM Intl Mfg, Inc. PAC

Mailing Address PO Box 777

City Medina State OH Zip Code 44258-0777

FEC ID number of contributing federal political committee. **C** C00402081

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 05 / 01 / 2008  
**Transaction ID:** 80708.C320  
 Amount of Each Receipt this Period: 5000.00  
 Receipt

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

Mailing Address 17889 Monterey Pine Dr

City Strongsville State OH Zip Code 44136-7133

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt: 05 / 22 / 2008  
**Transaction ID:** 80708.C334  
 Amount of Each Receipt this Period: 100.00  
 Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 6100.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 17 / 42
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
OHIOS FUTURE PAC

A.

Full Name (Last, First, Middle Initial) Ohio National Financial Services PAC		Date of Receipt
Mailing Address 1 Financial Way		<input type="text" value="04"/> / <input type="text" value="04"/> / <input type="text" value="2008"/>
City	State	Zip Code
Cincinnati	OH	45242
FEC ID number of contributing federal political committee.		Transaction ID: 80713.C342
<input type="text" value="C00296657"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="2500.00"/>
Occupation		Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="2500.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="2500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="8600.00"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 18 / 42
	(check only one)	
<input type="checkbox"/> 11a	<input checked="" type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
OHIOS FUTURE PAC

**A.**

Full Name (Last, First, Middle Initial) Stark County Republican Party		Date of Receipt
Mailing Address 2727 Fulton Dr NW		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 4 / 2 7 / 2 0 0 8
City	State	Zip Code
Canton	OH	44718-3505
FEC ID number of contributing federal political committee.		Transaction ID: 80708.C316
C C00270934		Amount of Each Receipt this Period
		1000.00
Name of Employer	Occupation	Receipt
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	1000.00	

**B.**

Full Name (Last, First, Middle Initial) Hamilton County Republican Party		Date of Receipt
Mailing Address 700 Walnut Street Suite 309		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 6 / 3 0 / 2 0 0 8
City	State	Zip Code
Cincinnati	OH	45202
FEC ID number of contributing federal political committee.		Transaction ID: 80713.C347
C		Amount of Each Receipt this Period
		342.00
Name of Employer	Occupation	In-Kind
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	342.00	Office Space (6/16 to 6/3-0/08)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1342.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	1342.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 19 / 42

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
OHIOS FUTURE PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Aviation Specialists of Cincinnati</p> <p>Mailing Address 4700 Airport Rd</p> <p>City Cincinnati State OH Zip Code 45226-1603</p> <p>Purpose of Disbursement Pilot Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80708.E117</p> <p>Date of Disbursement 04 / 26 / 2008</p> <p>Amount of Each Disbursement this Period 365.00</p> <p>Category/Type PILOT FEES</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) US Internal Revenue Service</p> <p>Mailing Address Department of Treasury</p> <p>City Cincinnati State OH Zip Code 45999-0005</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80708.E157</p> <p>Date of Disbursement 04 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 2739.25</p> <p>Category/Type PAYROLL TAXES</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) The Paroska Group</p> <p>Mailing Address 1500 W 3rd St Ste 120</p> <p>City Cleveland State OH Zip Code 44113-1447</p> <p>Purpose of Disbursement Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80708.E115</p> <p>Date of Disbursement 04 / 26 / 2008</p> <p>Amount of Each Disbursement this Period 1785.00</p> <p>Category/Type CONSULTING</p>

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

4889.25

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

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
OHIOS FUTURE PAC

A.	Full Name (Last, First, Middle Initial) Bricker & Eckler LLP	Transaction ID: 80708.E128 Date of Disbursement 05 / 14 / 2008
	Mailing Address 100 South Third Street	Amount of Each Disbursement this Period 425.00
	City Columbus State OH Zip Code 43215-	
	Purpose of Disbursement Legal Services Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		LEGAL SERVICES

B.	Full Name (Last, First, Middle Initial) US Postal Service	Transaction ID: 80713.E196 Date of Disbursement 04 / 14 / 2008
	Mailing Address 1591 Dalton Avenue	Amount of Each Disbursement this Period 7.13
	City Cincinnati State OH Zip Code 45234-	
	Purpose of Disbursement Postage Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: POSTAGE

C.	Full Name (Last, First, Middle Initial) US Postal Service	Transaction ID: 80713.E197 Date of Disbursement 05 / 14 / 2008
	Mailing Address 1591 Dalton Avenue	Amount of Each Disbursement this Period 8.40
	City Cincinnati State OH Zip Code 45234-	
	Purpose of Disbursement Postage Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: POSTAGE

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	425.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 42

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
OHIOS FUTURE PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Andrew D. Ciafardini</p> <p>Mailing Address 10838 Lakehurst Court</p> <p>City Cincinnati State OH Zip Code 45242-</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80708.E140 <b>Date of Disbursement</b> 06 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 5318.17</p> <p><b>PAYROLL</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Sir Speedy Printing</p> <p>Mailing Address 601 W Superior Ave Ste 100</p> <p>City Cleveland State OH Zip Code 44113-1815</p> <p>Purpose of Disbursement Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80708.E123 <b>Date of Disbursement</b> 04 / 26 / 2008</p> <p>Amount of Each Disbursement this Period 43.83</p> <p><b>PRINTING</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Anthem BCBS OH</p> <p>Mailing Address PO Box 105095</p> <p>City Atlanta State GA Zip Code 30348-5095</p> <p>Purpose of Disbursement Health Insurance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80708.E134 <b>Date of Disbursement</b> 05 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 205.98</p> <p><b>HEALTH INSURANCE</b></p>

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

5567.98

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 22 / 42

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
OHIOS FUTURE PAC

A.	Full Name (Last, First, Middle Initial) One Charlie Victor LLC	Transaction ID: 80708.E137 Date of Disbursement 06 / 10 / 2008
	Mailing Address 4228 Airport Road	Amount of Each Disbursement this Period 401.82
	City Cincinnati State OH Zip Code 45226-	
	Purpose of Disbursement Plane Rental	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PLANE RENTAL

B.	Full Name (Last, First, Middle Initial) Cloud Nine Corporation	Transaction ID: 80708.E127 Date of Disbursement 05 / 14 / 2008
	Mailing Address 336 Mitchell Ave	Amount of Each Disbursement this Period 1038.38
	City Batesville State IN Zip Code 47006-9015	
	Purpose of Disbursement Plane Rental	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PLANE RENTAL

C.	Full Name (Last, First, Middle Initial) Roger J Pelletier	Transaction ID: 80708.E136 Date of Disbursement 06 / 10 / 2008
	Mailing Address 7348 State Road	Amount of Each Disbursement this Period 150.00
	City Cincinnati State OH Zip Code 45230-	
	Purpose of Disbursement Pilot Fees	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PILOT FEES

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1590.20
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 23 / 42

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
OHIOS FUTURE PAC

A.

Full Name (Last, First, Middle Initial)  
Andrew D. Ciafardini

Transaction ID: 80708.E121  
Date of Disbursement

Mailing Address 10838 Lakehurst Court

05 / 14 / 2008

City Cincinnati State OH Zip Code 45242-

Amount of Each Disbursement this Period

Purpose of Disbursement  
Payroll

5318.17

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

PAYROLL

State: District:

B.

Full Name (Last, First, Middle Initial)  
Andrew D. Ciafardini

Transaction ID: 80708.E122  
Date of Disbursement

Mailing Address 10838 Lakehurst Court

04 / 26 / 2008

City Cincinnati State OH Zip Code 45242-

Amount of Each Disbursement this Period

Purpose of Disbursement  
Reimbursement (See Below)

436.76

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

REIMBURSEMENT (SEE BELOW)

State: District:

C.

Full Name (Last, First, Middle Initial)  
Million Air

Transaction ID: 80713.E194  
Date of Disbursement

Mailing Address 4700 Airport Road

03 / 29 / 2008

City Cincinnati State OH Zip Code 45226-

Amount of Each Disbursement this Period

Purpose of Disbursement  
Airplane Fuel

436.76

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

[MEMO ITEM]  
MEMO: AIRPLANE FUEL

State: District:

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

5754.93

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 24 / 42

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
OHIOS FUTURE PAC

A.	Full Name (Last, First, Middle Initial) Roger J Pelletier	Transaction ID: 80708.E129 Date of Disbursement 05 / 14 / 2008
	Mailing Address 7348 State Road	Amount of Each Disbursement this Period 600.00
	City Cincinnati State OH Zip Code 45230-	
	Purpose of Disbursement Pilot Fees	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PILOT FEES

B.	Full Name (Last, First, Middle Initial) Cleveland Letter Service	Transaction ID: 80708.E120 Date of Disbursement 04 / 26 / 2008
	Mailing Address 2150 Saint Clair Ave NE	Amount of Each Disbursement this Period 1061.91
	City Cleveland State OH Zip Code 44114-4047	
	Purpose of Disbursement Mailing Services	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		MAILING SERVICES

C.	Full Name (Last, First, Middle Initial) Andrew D. Ciafardini	Transaction ID: 80709.E160 Date of Disbursement 06 / 14 / 2008
	Mailing Address 10838 Lakehurst Court	Amount of Each Disbursement this Period 959.75
	City Cincinnati State OH Zip Code 45242-	
	Purpose of Disbursement Reimbursement (See Below)	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		REIMBURSEMENT (SEE BELOW)

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	2621.66
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements and may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
OHIOS FUTURE PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Minuteman Press Mailing Address 1105 Kenwood Road City Cincinnati State OH Zip Code 45242- Purpose of Disbursement Printing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80709.E170 Date of Disbursement 05 / 19 / 2008
	Category/Type Amount of Each Disbursement this Period 596.10 [MEMO ITEM] MEMO: PRINTING	

<b>B.</b> Full Name (Last, First, Middle Initial) Office Depot Mailing Address 5897 Pfeiffer Road City Cincinnati State OH Zip Code 45242- Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80709.E166 Date of Disbursement 05 / 08 / 2008
	Category/Type Amount of Each Disbursement this Period 106.48 [MEMO ITEM] MEMO: OFFICE SUPPLIES	

<b>C.</b> Full Name (Last, First, Middle Initial) Office Depot Mailing Address 5897 Pfeiffer Road City Cincinnati State OH Zip Code 45242- Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80709.E171 Date of Disbursement 05 / 19 / 2008
	Category/Type Amount of Each Disbursement this Period 11.72 [MEMO ITEM] MEMO: OFFICE SUPPLIES	

<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 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
OHIOS FUTURE PAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) State of Ohio Treasurer</p> <p>Mailing Address 9th Floor 30 East Broad Street</p> <p>City Columbus State OH Zip Code 43215-</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80713.E206 <b>Date of Disbursement</b> 06 / 26 / 2008</p> <p>Amount of Each Disbursement this Period 951.34</p> <p><b>PAYROLL TAXES</b></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Ries Insurance Agency</p> <p>Mailing Address 9420 Towne Square Ave Ste 11</p> <p>City Cincinnati State OH Zip Code 45242-6910</p> <p>Purpose of Disbursement Insurance premium</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80708.E153 <b>Date of Disbursement</b> 06 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 649.00</p> <p><b>INSURANCE PREMIUM</b></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Cleveland Letter Service</p> <p>Mailing Address 2150 Saint Clair Ave NE</p> <p>City Cleveland State OH Zip Code 44114-4047</p> <p>Purpose of Disbursement Mailing Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80708.E133 <b>Date of Disbursement</b> 05 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 1204.70</p> <p><b>MAILING SERVICES</b></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2805.04</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
OHIOS FUTURE PAC

A.	Full Name (Last, First, Middle Initial) Nancy R. Aichholz	Transaction ID: 80708.E112 Date of Disbursement 04 / 15 / 2008
	Mailing Address 8405 Indian Hill Road	Amount of Each Disbursement this Period 1304.40
	City Cincinnati State OH Zip Code 45243-	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

B.	Full Name (Last, First, Middle Initial) Anthem BCBS OH	Transaction ID: 80708.E119 Date of Disbursement 04 / 26 / 2008
	Mailing Address PO Box 105095	Amount of Each Disbursement this Period 205.98
	City Atlanta State GA Zip Code 30348-5095	
	Purpose of Disbursement Health Insurance Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		HEALTH INSURANCE

C.	Full Name (Last, First, Middle Initial) Andrew D. Ciafardini	Transaction ID: 80708.E113 Date of Disbursement 04 / 15 / 2008
	Mailing Address 10838 Lakehurst Court	Amount of Each Disbursement this Period 5224.42
	City Cincinnati State OH Zip Code 45242-	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	6734.80
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
OHIOS FUTURE PAC

A.	Full Name (Last, First, Middle Initial) Susan B Keffer	Transaction ID: 80708.E150 Date of Disbursement 06 / 20 / 2008
	Mailing Address 705 Miami Avenue	Amount of Each Disbursement this Period 105.54
	City Terrace Park State OH Zip Code 45174-	
	Purpose of Disbursement Mileage Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		MILEAGE

B.	Full Name (Last, First, Middle Initial) One Charlie Victor LLC	Transaction ID: 80708.E130 Date of Disbursement 05 / 14 / 2008
	Mailing Address 4228 Airport Road	Amount of Each Disbursement this Period 1527.38
	City Cincinnati State OH Zip Code 45226-	
	Purpose of Disbursement Plane Rental Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PLANE RENTAL

C.	Full Name (Last, First, Middle Initial) One Charlie Victor LLC	Transaction ID: 80708.E154 Date of Disbursement 04 / 26 / 2008
	Mailing Address 4228 Airport Road	Amount of Each Disbursement this Period 40.00
	City Cincinnati State OH Zip Code 45226-	
	Purpose of Disbursement Landing Fee Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		LANDING FEE

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1672.92
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
OHIOS FUTURE PAC

A.

Full Name (Last, First, Middle Initial)  
Ohio Department of Job & Family Svcs

Mailing Address PO Box 182413

City Columbus State OH Zip Code 43218-2413

Purpose of Disbursement  
Unemployment Insurance

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 80713.E198

Date of Disbursement

04 / 05 / 2008

Amount of Each Disbursement this Period

324.00

UNEMPLOYMENT INSURANCE

B.

Full Name (Last, First, Middle Initial)  
Andrew D. Ciafardini

Mailing Address 10838 Lakehurst Court

City Cincinnati State OH Zip Code 45242-

Purpose of Disbursement  
Return of Local Tax Withheld

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 80713.E205

Date of Disbursement

04 / 26 / 2008

Amount of Each Disbursement this Period

187.50

RETURN OF LOCAL TAX WITHH-  
ELD

C.

Full Name (Last, First, Middle Initial)  
The Paroska Group

Mailing Address 1500 W 3rd St Ste 120

City Cleveland State OH Zip Code 44113-1447

Purpose of Disbursement  
Event Supplies

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 80708.E114

Date of Disbursement

04 / 26 / 2008

Amount of Each Disbursement this Period

43.59

EVENT SUPPLIES

SUBTOTAL of Disbursements This Page (optional) ▶

555.09

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
OHIOS FUTURE PAC

A.	Full Name (Last, First, Middle Initial) One Charlie Victor LLC	Transaction ID: 80708.E138 Date of Disbursement 06 / 10 / 2008
	Mailing Address 4228 Airport Road	Amount of Each Disbursement this Period 37.50
	City Cincinnati State OH Zip Code 45226-	
	Purpose of Disbursement Landing Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		LANDING FEE

B.	Full Name (Last, First, Middle Initial) Anthem BCBS OH	Transaction ID: 80708.E151 Date of Disbursement 06 / 20 / 2008
	Mailing Address PO Box 105095	Amount of Each Disbursement this Period 205.98
	City Atlanta State GA Zip Code 30348-5095	
	Purpose of Disbursement Health Insurance	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		HEALTH INSURANCE

C.	Full Name (Last, First, Middle Initial) US Internal Revenue Service	Transaction ID: 80708.E158 Date of Disbursement 06 / 14 / 2008
	Mailing Address Department of Treasury	Amount of Each Disbursement this Period 2614.75
	City Cincinnati State OH Zip Code 45999-0005	
	Purpose of Disbursement Payroll Taxes	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL TAXES

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	2858.23
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
OHIOS FUTURE PAC

<b>A.</b> Full Name (Last, First, Middle Initial) One Charlie Victor LLC Mailing Address 4228 Airport Road City Cincinnati State OH Zip Code 45226- Purpose of Disbursement Landing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80708.E131 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 8
	Amount of Each Disbursement this Period 150.00 LANDING FEE

<b>B.</b> Full Name (Last, First, Middle Initial) The Union Club Mailing Address 1211 Euclid Ave City Cleveland State OH Zip Code 44115-1820 Purpose of Disbursement Event Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80708.E126 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 8
	Amount of Each Disbursement this Period 893.23 EVENT EXPENSE

<b>C.</b> Full Name (Last, First, Middle Initial) Andrew D. Ciafardini Mailing Address 10838 Lakehurst Court City Cincinnati State OH Zip Code 45242- Purpose of Disbursement Reimbursement (See Below) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80709.E173 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 8
	Amount of Each Disbursement this Period 1713.09 REIMBURSEMENT (SEE BELOW)

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2756.32
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
OHIOS FUTURE PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Andrew D. Ciafardini</p> <p>Mailing Address 10838 Lakehurst Court</p> <p>City Cincinnati State OH Zip Code 45242-</p> <p>Purpose of Disbursement Mileage Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80709.E191</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="491.63"/></p> <p><b>[MEMO ITEM]</b> MEMO: MILEAGE REIMBURSEMENT</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Minuteman Press</p> <p>Mailing Address 1105 Kenwood Road</p> <p>City Cincinnati State OH Zip Code 45242-</p> <p>Purpose of Disbursement Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80709.E190</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="35.40"/></p> <p><b>[MEMO ITEM]</b> MEMO: PRINTING</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Minuteman Press</p> <p>Mailing Address 1105 Kenwood Road</p> <p>City Cincinnati State OH Zip Code 45242-</p> <p>Purpose of Disbursement Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80709.E189</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="441.55"/></p> <p><b>[MEMO ITEM]</b> MEMO: PRINTING</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="0.00"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text" value=""/></p>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
OHIOS FUTURE PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Office Depot</p> <p>Mailing Address 5897 Pfeiffer Road</p> <p>City Cincinnati State OH Zip Code 45242-</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80709.E174 <b>Date of Disbursement</b> 04 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 21.45</p> <p><b>[MEMO ITEM]</b> MEMO: OFFICE SUPPLIES</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Office Depot</p> <p>Mailing Address 5897 Pfeiffer Road</p> <p>City Cincinnati State OH Zip Code 45242-</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80709.E175 <b>Date of Disbursement</b> 04 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 79.96</p> <p><b>[MEMO ITEM]</b> MEMO: OFFICE SUPPLIES</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) US Postal Service</p> <p>Mailing Address 1591 Dalton Avenue</p> <p>City Cincinnati State OH Zip Code 45234-</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80709.E184 <b>Date of Disbursement</b> 04 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 64.29</p> <p><b>[MEMO ITEM]</b> MEMO: POSTAGE</p>

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

0.00

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

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
OHIOS FUTURE PAC

A.	Full Name (Last, First, Middle Initial) US Postal Service	Transaction ID: 80709.E185 Date of Disbursement
	Mailing Address 1591 Dalton Avenue	<input type="text" value="04"/> / <input type="text" value="22"/> / <input type="text" value="2008"/>
	City Cincinnati State OH Zip Code 45234-	Amount of Each Disbursement this Period
	Purpose of Disbursement Postage	<input type="text" value="4.60"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> MEMO: POSTAGE

B.	Full Name (Last, First, Middle Initial) Nancy R. Aichholz	Transaction ID: 80708.E132 Date of Disbursement
	Mailing Address 8405 Indian Hill Road	<input type="text" value="05"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City Cincinnati State OH Zip Code 45243-	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="905.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

C.	Full Name (Last, First, Middle Initial) Nancy R. Aichholz	Transaction ID: 80708.E141 Date of Disbursement
	Mailing Address 8405 Indian Hill Road	<input type="text" value="06"/> / <input type="text" value="10"/> / <input type="text" value="2008"/>
	City Cincinnati State OH Zip Code 45243-	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="905.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1810.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
OHIOS FUTURE PAC

A.	Full Name (Last, First, Middle Initial) Sir Speedy Printing	Transaction ID: 80708.E116 Date of Disbursement 04 / 26 / 2008
	Mailing Address 601 W Superior Ave Ste 100	Amount of Each Disbursement this Period 401.62
	City Cleveland State OH Zip Code 44113-1815	
	Purpose of Disbursement Printing	
	Candidate Name	Category/Type
	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) ▼	PRINTING
	State: District:	

B.	Full Name (Last, First, Middle Initial) Nancy R. Aichholz	Transaction ID: 80708.E149 Date of Disbursement 06 / 20 / 2008
	Mailing Address 8405 Indian Hill Road	Amount of Each Disbursement this Period 301.38
	City Cincinnati State OH Zip Code 45243-	
	Purpose of Disbursement Reimbursement (See Below)	
	Candidate Name	Category/Type
	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) ▼	REIMBURSEMENT (SEE BELOW)
	State: District:	

C.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: 80709.E192 Date of Disbursement 04 / 07 / 2008
	Mailing Address 7800 Montgomery Road	Amount of Each Disbursement this Period 301.38
	City Cincinnati State OH Zip Code 45236-	
	Purpose of Disbursement Photocopies	
	Candidate Name	Category/Type
	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) ▼	[MEMO ITEM] MEMO: PHOTOCOPIES
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	703.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
OHIOS FUTURE PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Hamilton County Republican Party</p> <p>Mailing Address 700 Walnut Street Suite 309</p> <p>City Cincinnati State OH Zip Code 45202-</p> <p>Purpose of Disbursement Office Space (6/16 to 6/30/08)</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80713.C3471K <b>Date of Disbursement</b> 06 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 342.00</p> <p>IN KIND: OFFICE SPACE (6/-16 TO 6/30/08)</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) US Internal Revenue Service</p> <p>Mailing Address Department of Treasury</p> <p>City Cincinnati State OH Zip Code 45999-0005</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80708.E159 <b>Date of Disbursement</b> 06 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 2614.75</p> <p>PAYROLL TAXES</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) One Charlie Victor LLC</p> <p>Mailing Address 4228 Airport Road</p> <p>City Cincinnati State OH Zip Code 45226-</p> <p>Purpose of Disbursement Plane Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80708.E118 <b>Date of Disbursement</b> 04 / 26 / 2008</p> <p>Amount of Each Disbursement this Period 1200.73</p> <p>PLANE RENTAL</p>

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

4157.48

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

44901.90

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
OHIOS FUTURE PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Steve Austria for Congress</p> <p>Mailing Address c/o Donald Jones Treas 2537 Obetz Drive</p> <p>City Beaver creek State OH Zip Code 45434-</p> <p>Purpose of Disbursement CONTRIBUTION (G08)</p> <p>Candidate Name STEVE C AUSTRIA</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 07</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80708.E143 <b>Date of Disbursement</b> 06 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>CONTRIBUTION (G08)</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Chabot for Congress</p> <p>Mailing Address 3341 Harrison Avenue</p> <p>City Cincinnati State OH Zip Code 45211-</p> <p>Purpose of Disbursement CONTRIBUTION (G08)</p> <p>Candidate Name STEVE CHABOT</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 01</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80713.E203 <b>Date of Disbursement</b> 06 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>CONTRIBUTION (G08)</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Latourette for Congress</p> <p>Mailing Address PO Box 516</p> <p>City Painesville State OH Zip Code 44077-0516</p> <p>Purpose of Disbursement CONTRIBUTION (G08)</p> <p>Candidate Name STEVEN C LATOURETTE</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 14</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80708.E142 <b>Date of Disbursement</b> 06 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>CONTRIBUTION (G08)</p>

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

3000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
OHIOS FUTURE PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of John Boehner</p> <p>Mailing Address 7908-12 Cincinnati Dayton Road</p> <p>City West Chester State OH Zip Code 45069-</p> <p>Purpose of Disbursement CONTRIBUTION (G08)</p> <p>Candidate Name JOHN A BOEHNER</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: OH District: 08</p>	<p><b>Transaction ID:</b> 80708.E155</p> <p>Date of Disbursement 05 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>Category/Type CONTRIBUTION (G08)</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Ohio Republican Party</p> <p>Mailing Address 211 S 5th St</p> <p>City Columbus State OH Zip Code 43215-5203</p> <p>Purpose of Disbursement CONTRIBUTION (FEDERAL ACCOUNT)</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80708.E110</p> <p>Date of Disbursement 04 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/Type CONTRIBUTION (FEDERAL ACCOUNT)</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Schmidt for Congress</p> <p>Mailing Address 771 Wards Corner Road</p> <p>City Loveland State OH Zip Code 45140-</p> <p>Purpose of Disbursement CONTRIBUTION (G08)</p> <p>Candidate Name JEANNETTE H SCHMIDT</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: OH District: 02</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80713.E202</p> <p>Date of Disbursement 06 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/Type CONTRIBUTION (G08)</p>

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

4500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
OHIOS FUTURE PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Kirk Schuring for Congress <hr/> Mailing Address 400 Market Avenue N Suite 400 <hr/> City Canton State OH Zip Code 44702- <hr/> Purpose of Disbursement CONTRIBUTION (G08) <hr/> Candidate Name KIRK SCHURING <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 16 <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80713.E204 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00 <hr/> Category/ Type CONTRIBUTION (G08)
<b>B.</b> Full Name (Last, First, Middle Initial) Kirk Schuring for Congress <hr/> Mailing Address 400 Market Avenue N Suite 400 <hr/> City Canton State OH Zip Code 44702- <hr/> Purpose of Disbursement CONTRIBUTION (G08) <hr/> Candidate Name KIRK SCHURING <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 16 <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80412.E103 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00 <hr/> Category/ Type CONTRIBUTION (G08)

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

2000.00

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

9500.00

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
OHIOS FUTURE PAC

A.	Full Name (Last, First, Middle Initial) Citizens for Debbie Sutherland	Transaction ID: 80708.E105 Date of Disbursement
	Mailing Address PO Box 45456	<input type="text" value="04"/> / <input type="text" value="05"/> / <input type="text" value="2008"/>
	City Westlake State OH Zip Code 44145-0456	Amount of Each Disbursement this Period
	Purpose of Disbursement NON-FEDERAL (OHIO HOUSE) Candidate Name	<input type="text" value="1000.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Family First PAC	Transaction ID: 80708.E135 Date of Disbursement
	Mailing Address PO Box 806	<input type="text" value="06"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
	City Lebanon State OH Zip Code 45036-0806	Amount of Each Disbursement this Period
	Purpose of Disbursement NON-FEDERAL (STATE ACCOUNT) Candidate Name	<input type="text" value="250.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Karen Gillmor for Ohio	Transaction ID: 80708.E108 Date of Disbursement
	Mailing Address c/o Christopher N. Slagle, Treas 514 Hedgegate North Court	<input type="text" value="04"/> / <input type="text" value="07"/> / <input type="text" value="2008"/>
	City Tiffin State OH Zip Code 44883-	Amount of Each Disbursement this Period
	Purpose of Disbursement NON-FEDERAL (OHIO SENATE) Candidate Name	<input type="text" value="1000.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2250.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
OHIOS FUTURE PAC

A.

Full Name (Last, First, Middle Initial)  
Jimmy Stewart For State Senate

Transaction ID: 80708.E106

Date of Disbursement

Mailing Address 1021 Four Mile Creek Rd

/   /

City Coolville State OH Zip Code 45723-9502

Amount of Each Disbursement this Period

Purpose of Disbursement  
NON-FEDERAL (OHIO SENATE)

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Friends of Jill Thompson

Transaction ID: 80708.E107

Date of Disbursement

Mailing Address 107 E State St

/   /

City Athens State OH Zip Code 45701-1744

Amount of Each Disbursement this Period

Purpose of Disbursement  
NON-FEDERAL (OH HOUSE 92)

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Friends of Matthew J Dolan

Transaction ID: 80708.E144

Date of Disbursement

Mailing Address c/o Robert Dolan Treasurer  
100 7th Avenue, Box 12

/   /

City Chardon State OH Zip Code 44024-

Amount of Each Disbursement this Period

Purpose of Disbursement  
NON-FEDERAL (OH HOUSE 98)

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

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

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 42 / 42

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
OHIOS FUTURE PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Friends of Nan Baker <hr/> Mailing Address C/O Mark Getsay Treasurer 29761 Devonshire Oval <hr/> City Westlake State OH Zip Code 44145- <hr/> Purpose of Disbursement NON-FEDERAL (OH HOUSE 16) Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80708.E145 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 8
	Amount of Each Disbursement this Period 500.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Ringland for Judge Committee <hr/> Mailing Address c/o Linda Fraley Treas 3973 State Route 32 <hr/> City Batavia State OH Zip Code 45103- <hr/> Purpose of Disbursement NON-FEDERAL (OH LOCAL JUDICIAL) Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80708.E152 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 0 8
	Amount of Each Disbursement this Period 250.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	750.00
<b>TOTAL</b> This Period (last page this line number only) .....	5250.00