

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines. 12FE4M5
Ohio Grassroots Victory Fund

ADDRESS (number and street) 918 Pennsylvania Ave SE
 Check if different than previously reported. (ACC) Washington DC 20003

2. **FEC IDENTIFICATION NUMBER** ▼ C C00578609 3. IS THIS REPORT NEW (N) **OR** AMENDED (A) OH 00

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M / D D / Y Y Y Y in the State of
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y 01 / 01 / 2016 through M M / D D / Y Y Y Y 03 / 31 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Judith Zamore
Signature of Treasurer Judith Zamore *[Electronically Filed]* Date M M / D D / Y Y Y Y 04 / 15 / 2016

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

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name
Ohio Grassroots Victory Fund

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	25000.00	228500.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	100.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	25000.00	228400.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	31536.61	87445.11
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	31536.61	87445.11
8. Cash on Hand at Close of Reporting Period (from Line 27)	25954.89	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Ohio Grassroots Victory Fund

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	25000.00	188000.00
(ii) Unitemized.....	0.00	0.00
(iii) TOTAL of contributions from individuals ▶	25000.00	188000.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	40500.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	25000.00	228500.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	25000.00	228500.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	31536.61	87445.11
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	27000.00	115000.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. 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	100.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	100.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	58536.61	202545.11

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	59491.50
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	25000.00
25. SUBTOTAL (add Line 23 and Line 24).....	84491.50
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	58536.61
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	25954.89

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

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

FOR LINE NUMBER: PAGE 5 OF 9
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Ohio Grassroots Victory Fund

A. Full Name (Last, First, Middle Initial)
Richard L. Cahoon

Mailing Address 2490 Fairmount Blvd

City Cleveland Heights State OH Zip Code 44106-3175

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

Name of Employer Dealer Tire, LLC Occupation Executive

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 22 / 2016

Transaction ID : C6482012

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Richard H. Rosenthal

Mailing Address 8 Melville Ln

City Cincinnati State OH Zip Code 45208-3222

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

Name of Employer Not Employed Occupation Not Employed

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 04 / 2016

Transaction ID : C6468617

Amount of Each Receipt this Period
10000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Joseph S. Kanfer

Mailing Address 4445 Everett Rd

City Richfield State OH Zip Code 44286-9536

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

Name of Employer GOJO Industries, Inc. Occupation President

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 12 / 2016

Transaction ID : C6494569

Amount of Each Receipt this Period
10000.00

Memo Item

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

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

25000.00

25000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 9
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Ohio Grassroots Victory Fund

Full Name (Last, First, Middle Initial) A. First Data Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2016
Mailing Address PO Box 5180		Amount of Each Disbursement this Period 19.95
City Simi Valley	State CA	
Zip Code 93062-5180	Purpose of Disbursement Merchant Fees	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : D449400
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. First Data Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2016
Mailing Address PO Box 5180		Amount of Each Disbursement this Period 19.95
City Simi Valley	State CA	
Zip Code 93062-5180	Purpose of Disbursement Merchant Fees	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : D449401
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Cleveland Cavaliers		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2016
Mailing Address 1 Center Ct		Amount of Each Disbursement this Period 30000.00
City Cleveland	State OH	
Zip Code 44115-4001	Purpose of Disbursement Event Tickets	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : D448612
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	30039.90
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 9
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Ohio Grassroots Victory Fund

Full Name (Last, First, Middle Initial) A. Capitol Compliance Associates, Inc.		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2016
Mailing Address PO Box 15293		Amount of Each Disbursement this Period 1000.00
City Washington	State DC	
Zip Code 20003-0293	Purpose of Disbursement Compliance Services	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : D448613
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Amalgamated Bank		Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2016
Mailing Address 1825 K St NW		Amount of Each Disbursement this Period 36.18
City Washington	State DC	
Zip Code 20006-1202	Purpose of Disbursement Bank Fees	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : D449393
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. NGP-VAN, Inc.		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2016
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 300.00
City Washington	State DC	
Zip Code 20005-5006	Purpose of Disbursement Software	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : D448614
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1336.18
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 9
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Ohio Grassroots Victory Fund

Full Name (Last, First, Middle Initial) A. Amalgamated Bank		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2016
Mailing Address 1825 K St NW		Amount of Each Disbursement this Period 52.30
City Washington	State DC Zip Code 20006-1202	
Purpose of Disbursement Bank Fees	Category/Type	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : D449394
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Amalgamated Bank		Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2016
Mailing Address 1825 K St NW		Amount of Each Disbursement this Period 43.28
City Washington	State DC Zip Code 20006-1202	
Purpose of Disbursement Bank Fees	Category/Type	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : D449395
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. First Data Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2016
Mailing Address PO Box 5180		Amount of Each Disbursement this Period 19.95
City Simi Valley	State CA Zip Code 93062-5180	
Purpose of Disbursement Merchant Fees	Category/Type	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : D449399
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	115.53
TOTAL This Period (last page this line number only).....	31491.61

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 9
	<input type="checkbox"/> 17 20a <input checked="" type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Ohio Grassroots Victory Fund

Full Name (Last, First, Middle Initial) A. Ohio Democratic Party-Federal Account		Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2016
Mailing Address 340 E Fulton St		Amount of Each Disbursement this Period 8000.00
City Columbus	State OH	
Zip Code 43215-5418	Purpose of Disbursement Transfer	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : D449390
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Ohio Democratic Party-Federal Account		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2016
Mailing Address 340 E Fulton St		Amount of Each Disbursement this Period 9000.00
City Columbus	State OH	
Zip Code 43215-5418	Purpose of Disbursement Transfer	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : D449391
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Ohio Democratic Party-Federal Account		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2016
Mailing Address 340 E Fulton St		Amount of Each Disbursement this Period 10000.00
City Columbus	State OH	
Zip Code 43215-5418	Purpose of Disbursement Transfer	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : D449392
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	27000.00
TOTAL This Period (last page this line number only).....	27000.00