

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.   
SQUIRE SANDERS (US) LLP POLITICAL ACTION COMMITTEE 'SQUIRE SANDERS PAC'

ADDRESS (number and street)   
  
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼  CITY ▲ STATE ▲ ZIP CODE ▲  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

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

Type or Print Name of Treasurer Alex Shumate

Signature of Treasurer Alex Shumate [Electronically Filed] Date  /  /

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**SQUIRE SANDERS (US) LLP POLITICAL ACTION COMMITTEE 'SQUIRE SANDERS PAC'**

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

|  | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand<br>January 1, <input type="text" value="2013"/>  |                         | 19297.94                          |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | 13267.94                |                                   |
| (c) Total Receipts (from Line 19) .....  | 7525.00                 | 7525.00                           |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | 20792.94                | 26822.94                          |
| 7. Total Disbursements (from Line 31).....   | 14450.00                | 20480.00                          |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | 6342.94                 | 6342.94                           |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                   |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>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

**SQUIRE SANDERS (US) LLP POLITICAL ACTION COMMITTEE 'SQUIRE SANDERS PAC'**

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

| I. Receipts   | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:  |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees   |                               |                                   |
| (i) Itemized (use Schedule A).....  | 7525.00                       | 7525.00                           |
| (ii) Unitemized .....   | 0.00                          | 0.00                              |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶  | 7525.00                       | 7525.00                           |
| (b) Political Party Committees .....  | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....  | 0.00                          | 0.00                              |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....  | 7525.00                       | 7525.00                           |
| 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 Transfers (add 18(a) and 18(b))..   | 0.00                          | 0.00                              |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶                        | 7525.00                       | 7525.00                           |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶                                  | 7525.00                       | 7525.00                           |

**DETAILED SUMMARY PAGE**  
of Disbursements

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:  |                               |                                   |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4)                                  |                               |                                   |
| (i) Federal Share .....  | 0.00                          | 0.00                              |
| (ii) Non-Federal Share.....  | 0.00                          | 0.00                              |
| (b) Other Federal Operating Expenditures .....   | 0.00                          | 50.00                             |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 0.00                          | 50.00                             |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 3000.00                       | 5500.00                           |
| 24. Independent Expenditures (use Schedule E) .....  | 0.00                          | 0.00                              |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....                   | 0.00                          | 0.00                              |
| 26. Loan Repayments Made.....  | 0.00                          | 0.00                              |
| 27. Loans Made.....  | 0.00                          | 0.00                              |
| 28. Refunds of Contributions To:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                  | 0.00                          | 0.00                              |
| (b) Political Party Committees .....   | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....   | 0.00                          | 0.00                              |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....                            | 0.00                          | 0.00                              |
| 29. Other Disbursements .....  | 11450.00                      | 14930.00                          |
| 30. Federal Election Activity (2 U.S.C. §431(20))  |                               |                                   |
| (a) Allocated Federal Election Activity (from Schedule H6)                                     |                               |                                   |
| (i) Federal Share .....  | 0.00                          | 0.00                              |
| (ii) "Levin" Share.....  | 0.00                          | 0.00                              |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                           | 0.00                          | 0.00                              |
| (c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....           | 0.00                          | 0.00                              |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..      | 14450.00                      | 20480.00                          |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 14450.00                      | 20480.00                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | 7525.00                       | 7525.00                           |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | 7525.00                       | 7525.00                           |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 0.00                          | 50.00                             |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                 | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....              | 0.00                          | 50.00                             |

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

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 6 OF 16                 |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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)  
**SQUIRE SANDERS (US) LLP POLITICAL ACTION COMMITTEE 'SQUIRE SANDERS PAC'**

**A. Kirk Beckhorn**  
Full Name (Last, First, Middle Initial)

Mailing Address 8000 Tower Crescent Drive

City Vienna State VA Zip Code 22182-6207

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

Name of Employer Squire, Sanders & Dempsey LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 03 / 28 / 2013  
**Transaction ID : SA11AI.13304**

Amount of Each Receipt this Period 750.00

Contribution.

**B. David Goodman**  
Full Name (Last, First, Middle Initial)

Mailing Address 2236 Elandon Drive

City Cleveland Heights State OH Zip Code 44106

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

Name of Employer Squire, Sanders & Dempsey LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1575.00

Date of Receipt 03 / 27 / 2013  
**Transaction ID : SA11AI.13306**

Amount of Each Receipt this Period 1575.00

Contribution.

**C. Susan C. Hastings**  
Full Name (Last, First, Middle Initial)

Mailing Address 6562 Summer Wind Dr.

City Brecksville State OH Zip Code 44141

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

Name of Employer Squire, Sanders & Dempsey LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1425.00

Date of Receipt 03 / 29 / 2013  
**Transaction ID : SA11AI.13302**

Amount of Each Receipt this Period 1425.00

Contribution.

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3750.00

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

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

|   |                              |                                   |   |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page |                              | FOR LINE NUMBER: (check only one) | PAGE 7 OF 16  |
| <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)  
**SQUIRE SANDERS (US) LLP POLITICAL ACTION COMMITTEE 'SQUIRE SANDERS PAC'**

**A. Don Hughes**  
Full Name (Last, First, Middle Initial)

Mailing Address 7022 Brodie Boulevard

City Dublin State OH Zip Code 43017

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

Name of Employer Squire, Sanders & Dempsey LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 03 / 12 / 2013  
**Transaction ID : SA11AI.13307**

Amount of Each Receipt this Period 275.00

Payroll deduction.

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

Mailing Address 6016 East Lafayette Boulevard

City Scottsdale State AZ Zip Code 85251

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

Name of Employer Squire, Sanders & Dempsey LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 29 / 2013  
**Transaction ID : SA11AI.13303**

Amount of Each Receipt this Period 500.00

Contribution.

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

Mailing Address 17726 Country Hills Rd.

City Ashton State MD Zip Code 20861

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

Name of Employer Squire, Sanders & Dempsey, LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 03 / 28 / 2013  
**Transaction ID : SA11AI.13305**

Amount of Each Receipt this Period 3000.00

Contribution.

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 3775.00 |
| <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 8 OF 16  
(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)  
**SQUIRE SANDERS (US) LLP POLITICAL ACTION COMMITTEE 'SQUIRE SANDERS PAC'**

**A. Squire Sanders (US) LLP**

Full Name (Last, First, Middle Initial)  
Mailing Address 2000 Huntington Center  
41 South High Street

City Columbus State OH Zip Code 43215

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2013

**Transaction ID : SA11A1.13308**

Amount of Each Receipt this Period  
3144.00

Legal and accounting services.

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

**C.**

Full Name (Last, First, Middle Initial)  
Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 0.00    |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 7525.00 |



: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.13308

Legal and accounting services valued at \$3,144.00 have been provided to the PAC to maintain compliance with federal campaign finance law. The legal and accounting personnel providing these services were Nathanael Jonhenry and Jeffrey Weber.

Form/Schedule:

Transaction ID:

**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)

**SQUIRE SANDERS (US) LLP POLITICAL ACTION COMMITTEE 'SQUIRE SANDERS PAC'**

Full Name (Last, First, Middle Initial)

**A. Collins for Senator**

Mailing Address c/o Leo Loiselle, Treasurer  
P.O. Box 1096

City Bangor State ME Zip Code 04402

Purpose of Disbursement  
Campaign contribution.

011

Candidate Name

**Susan Collins**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: ME District:

Date of Disbursement

MM / DD / YYYY  
03 / 27 / 2013

Transaction ID : SB23.13313

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**B. Lofgren for Congress**

Mailing Address Mark Fredkin, Treasurer  
123 E. San Carlos St., #531

City San Jose State CA Zip Code 95112

Purpose of Disbursement  
Campaign contribution.

011

Candidate Name

**Zoe Lofgren**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CA District: 19

Date of Disbursement

MM / DD / YYYY  
03 / 22 / 2013

Transaction ID : SB23.13316

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

3000.00

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

3000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**SQUIRE SANDERS (US) LLP POLITICAL ACTION COMMITTEE 'SQUIRE SANDERS PAC'**

Full Name (Last, First, Middle Initial)

**A. Batchelder for Representative Committee**

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03    | / | 12    | / | 2013      |

Mailing Address Homer Davis, Treasurer  
4086 Irvine Oval

**Transaction ID : SB29.13329**

City Medina State OH Zip Code 44256

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Purpose of Disbursement  
Nonfederal contribution.

|                   |
|-------------------|
| 011               |
| Category/<br>Type |

Candidate Name

**William Batchelder**

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. Boosters for Perciak**

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03    | / | 27    | / | 2013      |

Mailing Address 17889 Monterey Pine

**Transaction ID : SB29.13312**

City Strongsville State OH Zip Code 44136

Amount of Each Disbursement this Period

|        |
|--------|
| 150.00 |
|--------|

Purpose of Disbursement  
Nonfederal contribution.

|                   |
|-------------------|
| 011               |
| Category/<br>Type |

Candidate Name

**Thomas Perciak**

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. Citizens Committee Supporting Mentor Schools**

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03    | / | 27    | / | 2013      |

Mailing Address c/o Pam Trivisonno, Treasurer  
P.O. Box 1184

**Transaction ID : SB29.13309**

City Mentor State OH Zip Code 44060

Amount of Each Disbursement this Period

|        |
|--------|
| 150.00 |
|--------|

Purpose of Disbursement  
Nonfederal contribution.

|                   |
|-------------------|
| 011               |
| Category/<br>Type |

Candidate Name

**Citizens Committee Supporting Mentor Schools**

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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

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

|         |
|---------|
| 5300.00 |
|---------|

|  |
|--|
|  |
|--|

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**SQUIRE SANDERS (US) LLP POLITICAL ACTION COMMITTEE 'SQUIRE SANDERS PAC'**

Full Name (Last, First, Middle Initial)

**A. Citizens for Barberton's Schools' Future**

Mailing Address Sally Avant, Treasurer  
479 Norton Avenue

City Barberton State OH Zip Code 44203

Purpose of Disbursement  
Nonfederal contribution.

011

Candidate Name

**Citizens for Barberton's Schools' Future**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 12 / 2013

Transaction ID : SB29.13337

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Citizens for Schools Committee**

Mailing Address Jane Ader, Treasurer  
18238 Timber Trails

City Marysville State OH Zip Code 43040

Purpose of Disbursement  
Nonfederal contribution.

011

Candidate Name

**Citizens for Schools Committee**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 12 / 2013

Transaction ID : SB29.13346

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Citizens for Westlake Schools**

Mailing Address Amy Havelka, Treasurer  
1820 Sperry's Forge Trail

City Westlake State OH Zip Code 44145

Purpose of Disbursement  
Nonfederal contribution.

011

Candidate Name

**Citizens for Westlake Schools**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 12 / 2013

Transaction ID : SB29.13349

Amount of Each Disbursement this Period

500.00

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

1250.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**SQUIRE SANDERS (US) LLP POLITICAL ACTION COMMITTEE 'SQUIRE SANDERS PAC'**

Full Name (Last, First, Middle Initial)

**A. Committee to Elect Manning**

Mailing Address 5380 Barton Road

City North Ridgeville State OH Zip Code 44039

Purpose of Disbursement  
Nonfederal contribution.

011

Candidate Name

**Gayle Manning**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 1 | 2 |   | 2 | 0 | 1 | 3 |

**Transaction ID : SB29.13330**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 3 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

**B. Coventry Levy Committee**

Mailing Address Robert L. Wohlgamuth, Treasurer  
4105 State Road

City Akron State OH Zip Code 44319

Purpose of Disbursement  
Nonfederal contribution.

011

Candidate Name

**Coventry Levy Committee**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 1 | 2 |   | 2 | 0 | 1 | 3 |

**Transaction ID : SB29.13344**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 3 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

**C. Driving Vermilion Forward**

Mailing Address Keri Angney, Treasurer  
3714 Elizabeth Drive

City Vermilion State OH Zip Code 44089

Purpose of Disbursement  
Nonfederal contribution.

011

Candidate Name

**Driving Vermilion Forward**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 1 | 2 |   | 2 | 0 | 1 | 3 |

**Transaction ID : SB29.13326**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

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

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 2 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

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

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 2 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**SQUIRE SANDERS (US) LLP POLITICAL ACTION COMMITTEE 'SQUIRE SANDERS PAC'**

Full Name (Last, First, Middle Initial)

**A. Friends of Marilyn Brown**

Mailing Address c/o Mark McGinnis, Treasurer  
545 East Town Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Nonfederal contribution.

011

Candidate Name

**Marilyn Brown**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 27 / 2013

**Transaction ID : SB29.13315**

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Hamilton County Republican Party**

Mailing Address Maggie Wuellner, Treasurer  
700 Walnut St., Ste. 309

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Nonfederal contribution.

011

Candidate Name

**Hamilton County Republican Party**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 22 / 2013

**Transaction ID : SB29.13322**

Amount of Each Disbursement this Period

1150.00

Full Name (Last, First, Middle Initial)

**C. Marlinton Citizens Committee**

Mailing Address Leslie Pierce, Treasurer  
13526 Osborne Ave. NE

City Alliance State OH Zip Code 44601

Purpose of Disbursement  
Nonfederal contribution.

011

Candidate Name

**Marlinton Citizens Committee**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 12 / 2013

**Transaction ID : SB29.13345**

Amount of Each Disbursement this Period

500.00

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

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

1900.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**SQUIRE SANDERS (US) LLP POLITICAL ACTION COMMITTEE 'SQUIRE SANDERS PAC'**

Full Name (Last, First, Middle Initial)

**A. Support Our Schools**

Mailing Address Barb Heimburger, Treasurer  
6207 Delora Avenue

City Brooklyn State OH Zip Code 44144

Purpose of Disbursement  
Nonfederal contribution.

011

Candidate Name

**Support Our Schools**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 12 / 2013

**Transaction ID : SB29.13338**

Amount of Each Disbursement this Period

750.00

Full Name (Last, First, Middle Initial)

**B. The Citizens Advisory Committee**

Mailing Address Susan Anderson, Treasurer  
P.O. Box 754

City Malvern State OH Zip Code 44644

Purpose of Disbursement  
Nonfederal contribution.

011

Candidate Name

**The Citizens Advisory Committee**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 12 / 2013

**Transaction ID : SB29.13341**

Amount of Each Disbursement this Period

350.00

Full Name (Last, First, Middle Initial)

**C. Willoughby-Eastlake Levy Committee**

Mailing Address Donna Crooks, Treasurer  
1040 Eastlake Drive

City Eastlake State OH Zip Code 44095

Purpose of Disbursement  
Nonfederal contribution.

011

Candidate Name

**Willoughby-Eastlake Levy Committee**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 12 / 2013

**Transaction ID : SB29.13352**

Amount of Each Disbursement this Period

500.00

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

1600.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**SQUIRE SANDERS (US) LLP POLITICAL ACTION COMMITTEE 'SQUIRE SANDERS PAC'**

Full Name (Last, First, Middle Initial)

**A. Youth Education Supporters - Y.E.S.**

Mailing Address Sue Haight, Treasurer  
P.O. Box 174

City Ashtabula State OH Zip Code 44005

Purpose of Disbursement  
Nonfederal contribution.

011

Candidate Name

**Youth Education Supporters - Y.E.S.**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
03 / 12 / 2013

**Transaction ID : SB29.13334**

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

200.00

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

11450.00