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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An Au	thorized Com	mittee	Offic	ce Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT		ample: If typing, type er the lines.	12FE4M5	
The Committee to E	Elect JD Wintere	99			1
ADDRESS (number and street	PO Box 471				
▼ Check if different					
than previously reported. (ACC)	Troy			OH 453	73
	I NUMBER W	CITY A		STATE ▲	ZIP CODE ▲
2. FEC IDENTIFICATION	N NUMBER ¥				STATE ▼ DISTRICT
C C00551465		3. IS THIS REPORT	NEW (N) OR	AMENDED (A)	OH 08
I. TYPE OF REPORT	(Choose One)	(b) 12-Day PRE	-Election Report for t	he:	
(a) Quarterly Reports:		П	Primary (12P)	General (12G)	Runoff (12R)
April 15 Quarte	erly Report (Q1)	H			Hanon (1211)
July 15 Quarte	rly Report (Q2)		Convention (12C)	Special (12S)	
	uarterly Report (Q3)	Election on	M M / D C	/ Y Y Y Y	in the State of
January 31 Yea	ar-End Report (YE)	(c) 30-Day POS	T -Election Report for	the:	
			General (30G)	Runoff (30R)	Special (30S)
X Termination Re	port (TER)	Election on	M M / D C) / Y Y Y Y	in the State of
5. Covering Period	M M / D D / 01	Y Y Y Y Y 2016	through	09 / D D / Y	y y y y 2016
certify that I have examine			owledge and belief it	is true, correct and cor	mplete.
Type or Print Name of Treas	Winteregg, JD, surer	, ,			
Signature of Treasurer	Winteregg, JD, , ,		[Electronically Filed]	Date 10	13 / Y Y Y Y Y Y Y Y 2016
NOTE: Submission of false, e	rroneous, or incomplete	information may	subject the person sign	ning this Report to the pe	enalties of 52 U.S.C. 83010
Office		omation may s	Subject the person sign	g the rioport to the pe	
Use					FEC FORM 3 (Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

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Write or Type Committee Name The Committee to Elect JD Winteregg

2016 04 2016 09 30 01 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 0.00 73571.19 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 2000.00 (from Line 20(d)) (c) Net Contributions (other than loans) 0.00 71571.19 (subtract Line 6(b) from Line 6(a)) 7. Net Operating Expenditures (a) Total Operating Expenditures 439.12 81570.95 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 439.12 81570.95 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of -13152.90 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D).....

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

PAGE 3 / 16

0.00

82671.19

FEC Form 3 (Revised 05/2016)
Write or Type Committee Name

The Committee to Elect JD Winteregg

(Dividends, Interest, etc.).....

(Carry Total to Line 24, page 4).....

16. **TOTAL RECEIPTS** (add Lines 11(e), 12, 13(c), 14, and 15)

04 09 01 2016 30 2016 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 0.00 52826.48 (i) Itemized (use Schedule A)..... 20744.71 0.00 (ii) Unitemized (iii) TOTAL of contributions 0.00 73571.19 from individuals 0.00 0.00 Political Party Committees..... Other Political Committees 0.00 0.00 (such as PACs) 0.00 0.00 The Candidate..... (d) TOTAL CONTRIBUTIONS (other than loans) 0.00 73571.19 (add Lines 11(a)(iii), (b), (c), and (d)).. 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES 13. LOANS: (a) Made or Guaranteed by the 0.00 9100.00 Candidate..... 0.00 0.00 (b) All Other Loans..... TOTAL LOANS 0.00 9100.00 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 0.00 0.00 (Refunds, Rebates, etc.) 15. OTHER RECEIPTS

0.00

0.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 16

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	439.12	81570.95
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
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	2000.00
	(b) Delitical Desta Committee	0.00	0.00
	(b) Political Party Committees(c) Other Political Committees		0.00
	(such as PACs)	0.00	0.00
		· · · · · ·	,
	(d) TOTAL CONTRIBUTION REFUNDS	0.00	2000.00
	(add Lines 20(a), (b), and (c))	, , , , , , ,	7
21.	OTHER DISBURSEMENTS	12957.01	12957.01
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	13396.13	96527.96
	III. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	rting period	243.23
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	0.00
25.	SUBTOTAL (add Line 23 and Line 24)		243.23
	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	13396.13
26.	(-	,	
	CASH ON HAND AT CLOSE OF REPORTING		

: 97 'A = G7 9 @ 5 B9 CI G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCFHZ'G7 < 98 I @ 'CF' + H9 A = N5 H+ CB

Form/Schedule: F3T Transaction ID:

All Credit Card Vendor expenses were itemized on previous reports

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

PAGE 6 16 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **x** 17 18 19a Detailed Summary Page 20a 20b 20c

19b 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) The Committee to Elect JD Winteregg Full Name (Last, First, Middle Initial) Date of Disbursement A. US Bank Checking 2016 Mailing Address PO Box 790408 City State Zip Code **FEC Identification Number** MO St. Louis 63179 Purpose of Disbursement Checking Account Service Charge C00551465 Candidate Name Amount of Each Disbursement this Period Category/ The Committee to Elect JD Winteregg Type Disbursement For: 2016 Office Sought: House 93.00 Senate Primary General Transaction ID: SB17.6040 Other (specify) President Memo Item OH State: District: Full Name (Last, First, Middle Initial) US Bank Checking Date of Disbursement Mailing Address PO Box 790408 2016 13 City State Zip Code **FEC Identification Number** MO 63179 St. Louis Purpose of Disbursement Checking Acct Analysis Service Charge C00551465 Candidate Name Amount of Each Disbursement this Period Category/ The Committee to Elect JD Winteregg Type 2.00 Office Sought: Disbursement For: 2016 House Senate Primary General Transaction ID: SB17.6041 Other (specify) President Memo Item District: Full Name (Last, First, Middle Initial) Date of Disbursement C. US Bank Visa Central Bill Account Mailing Address PO Box 790408 2016 City Zip Code State **FEC Identification Number** St. Louis MO 63179-0408 Purpose of Disbursement Interest fees incurred by bank C00551465 Candidate Name Amount of Each Disbursement this Period Category/ The Committee to Elect JD Winteregg Type Office Sought: Disbursement For: 2016 344.12 House Senate Primary General Transaction ID: SB17.6031 President Other (specify) ✗ Memo Item State: OH District: 08 SUBTOTAL of Disbursements This Page (optional)..... 95.00 TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3)

PAGE 16 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **x** 17 18 19a Detailed Summary Page 20b 20c

ITEMIZED DISBURSEMENTS 19b 20a 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) The Committee to Elect JD Winteregg Full Name (Last, First, Middle Initial) Date of Disbursement US Bank Visa Central Bill Account 2016 06 Mailing Address PO Box 790408 City State Zip Code **FEC Identification Number** MO St. Louis 63179-0408 Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type 344.12 Office Sought: House Disbursement For: Senate Primary General Transaction ID: SB17.6032 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement В. Mailing Address City State Zip Code **FEC Identification Number** Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: Office Sought: House Senate Primary General Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City State Zip Code **FEC Identification Number** Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 344.12 TOTAL This Period (last page this line number only)..... 439.12

Schedule					
TEMIZED DISBURSEMENTS Cor seach categopry of the 17 18 190 19	SC	CHEDULE B (FEC Form 3)			TOTT EINE NOMBETT.
Detailed Summary Page 20 20 20 1/21 Detailed Summary Page 20 20 20 1/21 Detailed Summary Page 20 20 20 20 20 20 20 20 20 20 20 20 20					
NAME OF COMMITTEE (in Full) The Committee to Elect JD Winteregg Full Name (Last, First, Middle Initial) US Bank Visa Central Bill Account Mailing Address PO Box 790408 Category/ Type Office Sought: House President Other (specify) ▼ State: Distrot: Full Name (Last, First, Middle Initial) Amount of Each Disbursement Full Name (Last, First, Middle Initial) State: Distrot: House President Other (specify) ▼ State: Distrot: First, Middle Initial) Mailing Address City State Zip Code FEC Identification Number Category/ Type Office Sought: House President Other (specify) ▼ State: Distrot: Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code FEC Identification Number Category/ Type Office Sought: House President Other (specify) ▼ Mailing Address City State Zip Code FEC Identification Number Category/ Type Office Sought: House President Other (specify) ▼ Mailing Address City State Zip Code FEC Identification Number Category/ Type Office Sought: House President Other (specify) ▼ Mailing Address City State Zip Code FEC Identification Number Category/ Type Memo Item Date of Disbursement this Period Category/ Type Memo Item	•	EMIZED DISBURSEMENTS			
Full Name (Last, First, Middle Initial) The Committee to Elect JD Winteregg Full Name (Last, First, Middle Initial) The Committee to Elect JD Winteregg Cardidate Name The Committee to Elect JD Winteregg Cardidate Name The Committee to Elect JD Winteregg Cardidate Name The Committee to Elect JD Winteregg Category Type Office Sought: House Disbursement For: 2016 Date of Disbursement this Period Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Fec Identification Number Category/ Type Transaction ID: \$821.6036 Memo Item Fec Identification Number Category/ Type Transaction ID: \$821.6036 Memo Item Date of Disbursement this Period Transaction ID: \$821.6036 Memo Item Date of Disbursement this Period Transaction ID: \$821.6036 Memo Item Date of Disbursement this Period Transaction ID: \$821.6036 Memo Item Date of Disbursement this Period Transaction ID: \$821.6036 Memo Item Date of Disbursement Category/ Type Memo Item Date of Disbursement Category/ Type Memo Item The Category/ Type Office Sought: House Disbursement For: Category/ Type Office Sought: House Disbursement For: Category/ Type Office Sought: House Disbursement For: Category/ Type Memo Item Memo Item					
Full Name (Last, First, Middle Initial) US Bank Visa Central Bill Account Mailing Address PO Box 790408 City St. Louis St.	$\overline{\ \ }$	` ,			
Additing Address PO Box 790408 City St. Louis State Zip Code S3179-0408 City St. Louis Molecular State Sanate President Sanate President State Disbursement Transaction 10: S821,6036 Molecular Sanate President State Disbursement Transaction 10: S821,6036 Memo Item State: District: City State Zip Code Transaction Number C Category Transaction 10: S821,6036 Memo Item Category Transaction 10: S821,6036		The Committee to Elect JD Winteregg			
Mailing Address PO Box 790408 City St. Louis		,	Data of Dichursoment		
City	٩.	US Bank visa Central Bill Account			
St. Louis		Mailing Address PO Box 790408			
St. Louis MU 63179-0408 Purpose of Disbursement In-kind contribution to campaign by JD Winteregg Candidate Name The Committee to Elect JD Winteregg Office Sought: House Sanate Priesident President President Other (specify) V State: OH Disbursement Disbursement For: 2016 Full Name (Last, First, Middle Initial) Mailing Address City State Disbursement For: Senate Primary General Other (specify) V Mailing Address City State Disbursement For: Senate Primary General Other (specify) V Mailing Address City State Disbursement For: Senate Primary General Other (specify) V Mailing Address City State Disbursement For: Senate President Other (specify) V Mailing Address City State Disbursement For: Senate President Other (specify) V Mailing Address City State Disbursement For: Senate Primary General Other (specify) V Mailing Address City State Disbursement For: Senate Primary General Other (specify) V Mailing Address City State Disbursement For: Senate Primary General Other (specify) V Mailing Address City State Disbursement For: Senate Primary General Other (specify) W Memo Item Mem		City State	Zip Code		CEC Identification Number
Candidate Name The Committee to Elect JD Winteregg Office Sought: House Senate President State: OH District: 08 Full Name (Last, First, Middle Initial) Name (Last, First, Middle Initial) State: Disbursement For: 2016 Furpose of Disbursement Category/ Type 12957.01 Transaction ID : SB21.6036 Memo Item Date of Disbursement Category/ Type 12957.01 Transaction ID : SB21.6036 Memo Item FEC Identification Number Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ Mailing Address City State Zip Code FEC Identification Number Category/ Type Memo Item Date of Disbursement this Period FEC Identification Number Category/ Type Memo Item Date of Disbursement this Period FEC Identification Number Category/ Type Memo Item Date of Disbursement this Period Transaction ID : SB21.6036 Memo Item Memo Item Memo Item Memo Item Memo Item		Ci. Eddie	63179-0408		
The Committee to Elect JD Winteregg Office Sought: House Disbursement For: 2016 12957.01 12957.01 State: OH District: OB President Presi		Purpose of Disbursement In-kind contribution to campaign by JD Winteregg			C C00551465
Office Sought:					Amount of Each Disbursement this Period
Senate President Other (specify) ▼ State: OH District: 08 Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code FEC Identification Number Cardidate Name Office Sought: House President President Other (specify) ▼ State: District: District: District: Purpose of Disbursement Candidate Name Office Sought: House President Other (specify) ▼ Mailing Address City State Zip Code FEC Identification Number Category/ Type Memo Item Date of Disbursement this Period Amount of Each Disbursement this Period Date of Disbursement this Period Category/ Type Office Sought: House Primary General Other (specify) ▼ Mailing Address City State Zip Code FEC Identification Number Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ Amount of Each Disbursement this Period Office Sought: House Senate Primary General Other (specify) ▼ Memo Item Memo Item Memo Item			·· 2016	Туре	12957 01
State: OH District: 08		The stage of the s			
Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Disbursement For: President State: District: Full Name (Last, First, Middle Initial) Mailing Address City State Disbursement For: President Other (specify) Mailing Address City State City State City State State Disbursement Category/ Type Memo Item FEC Identification Number Category/ Type Memo Item FEC Identification Number Category/ Type Memo Item FEC Identification Number Category/ Type Memo Item State: Disbursement Category/ Type Office Sought: House Senate Primary General Other (specify) Memo Item Memo Item			specify) ▼		Memo Item
Mailing Address City	_	Clate. Biothot.			
Mailing Address City	2	Tail Harle (East, Filet, Madie Hittal)			Date of Disbursement
City State Zip Code FEC Identification Number Category/ Type Office Sought: House Primary General Other (specify) Till Name (Last, First, Middle Initial) Mailing Address City State Zip Code FEC Identification Number Category/ Type Office Sought: House Disbursement For: Category/ Type Office Sought: State Zip Code FEC Identification Number Category/ Type Office Sought: House Disbursement For: Senate Primary General Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) Memo Item Office Sought: House Disbursement For: Senate Primary General Other (specify) Memo Item Memo Item Office Sought: Memo Item Memo Item	٥.		M M / D D / Y Y Y		
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Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Candidate Name Candidate Name Candidate Name Disbursement For: Candidate Name Candidate Name Candidate Name Candidate Name Disbursement For: Senate Primary General Other (specify) ▼ Memo Item FEC Identification Number Category/ Type Memo Item		City State	Zip Code		FEC Identification Number
Candidate Name Category/ Type Office Sought:		Durana of Dishurana			
Office Sought: House Senate Primary General Other (specify) Memo Item State: District: Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code FEC Identification Number Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) Memo Item Category/ Type Memo Item State: District: Memo Item		Purpose of Disbursement			
Office Sought: House Senate Primary General Other (specify) Memo Item State: District: Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code FEC Identification Number Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) Memo Item Type Memo Item FEC Identification Number Category/ Type Office Sought: House Senate Primary General Other (specify) Memo Item State: District: Memo Item		Candidate Name	Category/	Amount of Each Disbursement this Period	
Senate President Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ State: District: Memo Item Memo Item Amount of Each Disbursement this Period Other (specify) ▼ Memo Item					
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State: District: Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code FEC Identification Number Candidate Name Category/ Type Office Sought: House President State: District: M M M / D D / Y Y Y Y Y Amount of Each Disbursement this Period Memo Item					Momo Itom
Mailing Address City State Zip Code FEC Identification Number Candidate Name Category/ Type Office Sought: House Senate President President State: District: Date of Disbursement M M / D D / Y Y Y Y Y FEC Identification Number Category/ Type Amount of Each Disbursement this Period Memo Item					Wolle lell
Mailing Address City State Zip Code FEC Identification Number Candidate Name Category/ Type Office Sought: House Senate President President State: District: M M M / D D / Y Y Y Y Y Amount of Each Disbursement this Period Memo Item		Full Name (Last, First, Middle Initial)			Date of Dishursement
City State Zip Code FEC Identification Number Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) State: District: Memo Item	Э.				
Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) State: District: House Senate Primary General Other (specify) Memo Item		Mailing Address	M M / D D / Y Y Y		
Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) State: District: Category/ Type Amount of Each Disbursement this Period Memo Item		City State	Zip Code		FEC Identification Number
Office Sought: House Senate Primary General Other (specify) State: District: Memo Item		Purpose of Disbursement			C
Office Sought: House Senate Primary General Other (specify) State: District: Memo Item		Candidate Name		Assessment of Feeth Diehouseement this Deviced	
Senate Primary General Other (specify) State: District: Primary General Other (specify) Memo Item			Amount of Each dispulsement this Period		
State: District: Other (specify) Memo Item					
State: District:					
SUBTOTAL of Disbursements This Page (optional)			▼		Memo Item
		SUBTOTAL of Disbursements This Page (optional)			12957 01

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

12957.01

SCHEDULE C (FEC Form 3) LOANS

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

PAGE 9 OF
FOR LINE NUMBER:
(check only one)

13a 13b

16

						130	
	ME OF COMMITTEE (In Full) he Committee to Elect JD \	Wintere	egg		Transa	ction ID : SC/10.5189	
	LOAN SOURCE Full Name (Last, Winteregg, JD, , ,	Primary General					
	Mailing Address 504 S. Market St.			Other (specify)			
	City State ZIP Code Troy OH 45373					Personal Funds of the Candidate	
	Original Amount of Loan		Cumulative Pay			ance Outstanding at Close of This Period	
	2500	0.00	9		0.00		
	TERMS Date Incurred		D	ate Due	Interest Rat (If none, ente		
	M11M / D09D / Y Z015	Y	M M / D D	/ Y	ňoně ^Y 0	.00 % (apr) Yes X No	
	List All Endorsers or Guarantors	(if any) to	Loan Source				
	1. Full Name (Last, First, Middle I	nitial)			Name of Employer		
	Mailing Address				Occupation		
	City	State	ZIP Code		Amount Guaranteed Outstanding:	9 9	
ŀ	Full Name (Last, First, Middle Initial) Mailing Address				Name of Employer		
-				Occupation			
-			T		Amount Guaranteed Outstanding: Name of Employer Occupation		
	City	State	ZIP Code				
	3. Full Name (Last, First, Middle In	itial)					
	Mailing Address						
-	City State ZIP Code				Amount Guaranteed Outstanding:		
Ì	4. Full Name (Last, First, Middle Initial)				Name of Employer		
	Mailing Address			Occupation			
					Amount		
	City	State	ZIP Code		Guaranteed Outstanding:	7	
SI	JBTOTALS This Period This Page (optional)				0.00	
TC	OTALS This Period (last page in this	line only	·)			7 7 7	
C	arry outstanding balance only to I !!	NE 3. Sch	edule D. for this	s line. If	no Schedule D. carry for	ward to appropriate line of Summary.	
	,	,			Julianie 2 , Juliy 101		

: 97 A = G7 9 @ G B9 C I G H9 L H F 9 @ 5 H9 8 HC 5 F 9 D C F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: SC/10 Transaction ID: SC/10.5189

(Current loan amount of 2500.00 from a balance of 2500.00 has been forgiven)

SCHEDULE C (FEC Form 3) LOANS

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

PAGE 11 OF
FOR LINE NUMBER:
(check only one)

13a 13b

16

						130	
	ME OF COMMITTEE (In Full) he Committee to Elect JD \	Wintere	egg		Transa	action ID : SC/10.5673	
	LOAN SOURCE Full Name (Last, Winteregg, JD, , ,	Election: 2016 Primary General					
	Mailing Address 504 S. Market St.					Other (specify)	
•	City State ZIP Code Troy OH 45373				de	Personal Funds of the Candidate	
	Troy OH 45373 Original Amount of Loan Cumulative Payment To [Date Ba	 ance Outstanding at Close of This Period	
	2000	0.00	,		0.00		
	TERMS Date Incurred		С	Date Due	Interest Ra (If none, ent		
	M01 ^M / D09 ^D / Y Ž016	Y	M M / D D	/ Y	Y Y Y	0.00 % (apr) Yes X No	
	List All Endorsers or Guarantors	(if any) to	o Loan Source				
	1. Full Name (Last, First, Middle I	nitial)			Name of Employer		
•	Mailing Address				Occupation		
	City	State	ZIP Code		Amount Guaranteed Outstanding:	7	
	2. Full Name (Last, First, Middle Initial)				Name of Employer		
	Mailing Address				Occupation		
	City	State	ZIP Code		Guaranteed Outstanding:		
	3. Full Name (Last, First, Middle In	itial)			Name of Employer Occupation		
	Mailing Address						
	City State ZIP Code				Amount Guaranteed Outstanding:		
	4. Full Name (Last, First, Middle Initial)				Name of Employer		
	Mailing Address			Occupation Amount			
	City	State	ZIP Code		Guaranteed Outstanding:	7	
SI	JBTOTALS This Period This Page (optional)			······	0.00	
т	OTALS This Period (last page in this	line only	·) ·······			7 7 7	
С	arry outstanding balance only to LII	NE 3, Sch	nedule D, for this	s line. If	no Schedule D, carry for	rward to appropriate line of Summary.	
	,	.,	,				

: 97 A = G7 9 @ G B9 C I G H9 L H F 9 @ 5 H9 8 HC 5 F 9 D C F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: SC/10 Transaction ID: SC/10.5673

(Current loan amount of 2000.00 from a balance of 2000.00 has been forgiven)

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER: (check only one)

PAGE 13

13a

OF

16

						130	
	ME OF COMMITTEE (In Full) ne Committee to Elect JD '	Wintere	egg		Transa	action ID : SC/10.5674	
	LOAN SOURCE Full Name (Last, Winteregg, JD, , ,	Election: 2016 x Primary General					
	Mailing Address 504 S. Market St.				Other (specify)		
	City State ZIP Code					Personal Funds of the Candidate	
ŀ	Troy OH 45373 Original Amount of Loan Cumulative Payment To I					lance Outstanding at Close of This Period	
	4600	0.00	ournalities i a	ymont 10	0.00	0.00	
	TERMS Date Incurred		C	Date Due	Interest Ra (If none, ente		
	M02M / D12D / Y Z016	Υ	M M / D D	/ Y	0.00 % (apr) Yes X No		
	List All Endorsers or Guarantors	(if any) to	o Loan Source				
	1. Full Name (Last, First, Middle I	nitial)			Name of Employer		
	Mailing Address				Occupation		
-	City	State	ZIP Code		Amount Guaranteed Outstanding:	7	
	2. Full Name (Last, First, Middle Initial) Mailing Address				Name of Employer Occupation		
		_			Amount Guaranteed Outstanding: Name of Employer Occupation Amount Guaranteed		
	City	State	ZIP Code				
	3. Full Name (Last, First, Middle In	itial)					
	Mailing Address						
-	City	State	ZIP Code				
-	4. Full Name (Last, First, Middle Initial)				Outstanding: Name of Employer		
-	Mailing Address				Occupation Amount		
	City	State	ZIP Code		Guaranteed Outstanding:	7 7	
SL	JBTOTALS This Period This Page (optional)				0.00	
	OTALS This Period (last page in this					0.00	
C	arry outstanding balance only to LI	NE 3, Sch	edule D, for this	s line. If	no Schedule D, carry for	rward to appropriate line of Summary.	

: 97 A = G7 9 @ G B9 C I G H9 L H F 9 @ 5 H9 8 HC 5 F 9 D C F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: SC/10 Transaction ID: SC/10.5674

(Current loan amount of 4600.00 from a balance of 4600.00 has been forgiven)

SCHEDULE D (FEC Form 3) **DEBTS AND OBLIGATIONS**

Excluding Loans

(Use separate schedule(s) for each (chec numbered line)

PAGE 15 OF FOR

PAGE	15	OF	16
E NUME	BER:		9
 ,,		¥	10

The Committee (In Full)	lect JD	Winteregg				
A. Full Name (Last, First, Middle Initial) of US Bank Visa Central Bill A	Nature of Debt (Purpose): Items charged shown in memo text in disbursements					
Mailing Address PO Box 790408						
City St. Louis						
Outstanding Balance Beginning This Per	Transaction ID : SD10.5690					
12612.89						
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period			
0.00		12957.01	-344.12			
B. Full Name (Last, First, Middle Initial) of US Bank Visa Central Bill Ad		itor	Nature of Debt (Purpose): Interest accrued by bank			
Mailing Address PO Box 790408						
City St. Louis	State MO	Zip Code 63179-0408				
Outstanding Balance Beginning This Per 0.00	iod		Transaction ID : SD10.6035			
Amount Incurred This Period						
344.12		0.00	344.12			
C. Full Name (Last, First, Middle Initial) of	Debtor or Cre	ditor	Nature of Debt (Purpose):			
Mailing Address						
City	State	Zip Code				
Outstanding Balance Beginning This Per						
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period			
1) SUBTOTALS This Period This Page (option	onal) ·····		0.00			
2) TOTALS This Period (last page this line n	umber only) ·····		0.00			
3) TOTAL OUTSTANDING LOANS from Sch	edule C (last p	age only)·····	•			
4) ADD 2) and 3) and carry forward to appr	>					

: 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ 5 H9 8 'HC '5 'F9 DC FHZ G7 < 98 I @ 'C F' + H9 A = N5 H= C B

Form/Schedule: SD10 Transaction ID: SD10.5690

Vendors names, addresses, purchase amounts and dates are listed as memos in distributions.