

# 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. 12FE4M5

Cincinnatus PAC

ADDRESS (number and street) 225 W Court St

Check if different than previously reported. (ACC)

Cincinnati OH 45202

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00574228

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 M M M / D D D / Y Y Y Y Y Y in the State of  

(d) 30-Day POST-Election Report for the:

General (30G)  Runoff (30R)  Special (30S)

Election on M M M / D D D / Y Y Y Y Y Y in the State of  

5. Covering Period M M M / D D D / Y Y Y Y Y Y 07 / 01 / 2017 through M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2017

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

Callan, Sean, P., ,

Type or Print Name of Treasurer \_\_\_\_\_

Signature of Treasurer Callan, Sean, P., , [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y 01 / 30 / 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Cincinnatus PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2017"/>		<input type="text" value="13815.60"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="9978.08"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="96400.00"/>	<input type="text" value="141750.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="106378.08"/>	<input type="text" value="155565.60"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="59804.69"/>	<input type="text" value="108992.21"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="46573.39"/>	<input type="text" value="46573.39"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**Cincinnatus PAC**

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2017 To: M M / D D / Y Y Y Y 12 / 31 / 2017

<b>I. Receipts</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	71250.00	113750.00
(ii) Unitemized .....	450.00	900.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	71700.00	114650.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	24700.00	27100.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	96400.00	141750.00
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)).....▶	96400.00	141750.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	96400.00	141750.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B 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 .....	35304.69	75642.21
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	35304.69	75642.21
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	250.00	1250.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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	1000.00
(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	1000.00
29. Other Disbursements (Including Non-Federal Donations).....	24250.00	31100.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	59804.69	108992.21
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	59804.69	108992.21

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	96400.00	141750.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	1000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	96400.00	140750.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	35304.69	75642.21
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	35304.69	75642.21

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 64
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<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)  
**Cincinnatus PAC**

**A. Beck, Louis, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8534 E Kemper Rd  
 City Cincinnati State OH Zip Code 45249  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Janus Properties Occupation (for Individual) Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **07 / 10 / 2017**  
**Transaction ID : SA11AI.5062**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. Bortz, Neil, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1055 Paul St  
 City Cincinnati State OH Zip Code 45202  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Towne Properties Occupation (for Individual) Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **11 / 03 / 2017**  
**Transaction ID : SA11AI.5091**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**C. Butler, William, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 75020  
 City Cincinnati State OH Zip Code 45275  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Cincinnati Barge & Rail Termin Occupation (for Individual) Executive  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **10 / 30 / 2017**  
**Transaction ID : SA11AI.5090**  
 Amount of Each Receipt this Period 600.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10600.00
<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: (check only one)	PAGE 7 OF 64
	<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	

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

**A. Cassady, Tom, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1144 Edwards Rd  
 City Cincinnati State OH Zip Code 45208  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) USI, Inc. Occupation (for Individual) Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 12 / 2017  
**Transaction ID : SA11AI.5100**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**B. Castellini, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2180 Grandin Rd  
 City Cincinnati State OH Zip Code 45208  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RHC Holdings, Inc. Occupation (for Individual) Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 28 / 2017  
**Transaction ID : SA11AI.5093**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

**C. Castellini, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2180 Grandin Rd  
 City Cincinnati State OH Zip Code 45208  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 28 / 2017  
**Transaction ID : SA11AI.5095**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	11000.00
<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: (check only one)	PAGE 8 OF 64
<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)  
**Cincinnatus PAC**

**A. Cleves, Joe, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2458 Kremers Lane  
 City Villa Hills State KY Zip Code 41017  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Taft Stettinius & Hollister LL Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 29 / 2017  
**Transaction ID : SA11AI.5117**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Coletti, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4885 Drake Rd  
 City Cincinnati State OH Zip Code 45243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) KMK Law Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 04 / 2017  
**Transaction ID : SA11AI.5084**  
 Amount of Each Receipt this Period  
 2200.00  
 Memo Item

**C. Coletti, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4885 Drake Rd  
 City Cincinnati State OH Zip Code 45243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) KMK Law Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 3700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 11 / 2017  
**Transaction ID : SA11AI.5097**  
 Amount of Each Receipt this Period  
 1500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3950.00
<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: (check only one)	PAGE 9 OF 64
	<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	

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Daoud, Sami, , ,**

Mailing Address 17080 St Rt 247

City Seaman	State OH	Zip Code 45679
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DIFR LLC	Occupation (for Individual) CEO
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1100.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2017

**Transaction ID : SA11AI.5080**

Amount of Each Receipt this Period  
1100.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Diller, Ed, , ,**

Mailing Address 30 Thomas Pointe Dr

City Ft Thomas	State KY	Zip Code 41075
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Taft Stettinius & Hollister LL	Occupation (for Individual) Attorney
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2017

**Transaction ID : SA11AI.5123**

Amount of Each Receipt this Period  
500.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Glover, George, , ,**

Mailing Address 7910 Loneoak Dr

City Cincinnati	State OH	Zip Code 45243
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Focused Capital Solutions	Occupation (for Individual) Member
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	12	/	2017

**Transaction ID : SA11AI.5098**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2100.00
<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 10 OF 64
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Hayden, Mark, , ,**

Mailing Address 3601 Observatory Ave

City Cincinnati	State OH	Zip Code 45208
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Taft Stettinius & Hollister LL	Occupation (for Individual) Attorney
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2017

**Transaction ID : SA11AI.5115**

Amount of Each Receipt this Period  
250.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Heckler, Alex, , ,**

Mailing Address 4555 N Bay Rd

City Miami Beach	State FL	Zip Code 33140
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LSN Partners	Occupation (for Individual) CEO
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2017

**Transaction ID : SA11AI.5082**

Amount of Each Receipt this Period  
5000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Heidt, Chip, , ,**

Mailing Address 250 Grandview Dr #400

City Ft. Mitchell	State KY	Zip Code 41017
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Wellington	Occupation (for Individual) Physician
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2017

**Transaction ID : SA11AI.5077**

Amount of Each Receipt this Period  
5000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10250.00
<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: (check only one)	PAGE 11 OF 64
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

**A. Heidt, Julie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 100 W. Liberty Street  
 City Reno State NV Zip Code 89501  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Wellington Orthopedic Occupation (for Individual) Chief of Medicine  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 19 / 2017  
**Transaction ID : SA11AI.5079**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. Heidt, Rob, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 100 W. Liberty Street  
 City Reno State NV Zip Code 89501  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Unemployed Occupation (for Individual) Unemployed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 01 / 2017  
**Transaction ID : SA11AI.5064**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

**C. Herche, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2613 Handasyde Ave  
 City Cincinnati State OH Zip Code 45208  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Enerfab, Inc. Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 01 / 2017  
**Transaction ID : SA11AI.5075**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10300.00
<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 12 OF 64  
(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)  
**Cincinnatus PAC**

**A. Joseph, Marcia, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1116 Leafree Ct

City Cincinnati	State OH	Zip Code 45208
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Unemployed	Occupation (for Individual) Unemployed
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4600.00

Date of Receipt  
08 / 03 / 2017  
**Transaction ID : SA11AI.5070**

Amount of Each Receipt this Period  
500.00

Memo Item

**B. Joseph, Ronald, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 250 E 5th St, #285

City Cincinnati	State OH	Zip Code 45202
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Joseph Toyota	Occupation (for Individual) Chairman
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5100.00

Date of Receipt  
08 / 02 / 2017  
**Transaction ID : SA11AI.5069**

Amount of Each Receipt this Period  
900.00

Memo Item

**C. Joseph, Ronald, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 250 E 5th St, #285

City Cincinnati	State OH	Zip Code 45202
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Joseph Toyota	Occupation (for Individual) Chairman
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
7100.00

Date of Receipt  
10 / 26 / 2017  
**Transaction ID : SA11AI.5089**

Amount of Each Receipt this Period  
2000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3400.00
<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: (check only one)	PAGE 13 OF 64
<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)  
**Cincinnatus PAC**

**A. Mahjan, Anjali, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1404 E McMilan #7  
 City Cincinnati State OH Zip Code 45206  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Trihealth Occupation (for Individual) Doctor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 14 / 2017  
**Transaction ID : SA11AI.5071**  
 Amount of Each Receipt this Period 400.00  
 Memo Item

**B. Neyer, Dan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3018 Golden Ave  
 City Cincinnati State OH Zip Code 45226  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Neyer Properties Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 08 / 02 / 2017  
**Transaction ID : SA11AI.5068**  
 Amount of Each Receipt this Period 4000.00  
 Memo Item

**C. Power, Greg, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6650 Alberly Lane  
 City Cincinnati State OH Zip Code 45243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Carew Ralty, LLC Occupation (for Individual) Executive  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 04 / 2017  
**Transaction ID : SA11AI.5086**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	9400.00
<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 OF 64
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

**A. Ritter, James, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2324 Madison Road #209

City Cincinnati	State OH	Zip Code 45208
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Taft Stettinius & Hollister LL	Occupation (for Individual) Attorney
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2017

**Transaction ID : SA11AI.5119**

Amount of Each Receipt this Period  
250.00

Memo Item

**B. Ruh, Dan, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 154 Park Rd

City Ft Wright	State KY	Zip Code 41011
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Al Neyer, Inc.	Occupation (for Individual) COO
---	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	12	/	2017

**Transaction ID : SA11AI.5102**

Amount of Each Receipt this Period  
1500.00

Memo Item

**C. Thursby, Wendy, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2613 Handyasyde Ave

City Cincinnati	State OH	Zip Code 45208
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Unemployed	Occupation (for Individual) N/A
---	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	01	/	2017

**Transaction ID : SA11AI.5076**

Amount of Each Receipt this Period  
5000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6750.00
<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: (check only one)	PAGE 15 OF 64
	<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	

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

**A. Weiland, Dick, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2444 Madison Rd  
 City Cincinnati State OH Zip Code 45208  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) N/A  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 20 / 2017  
**Transaction ID : SA11AI.5088**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item

**B. Weiland, Dick, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2444 Madison Rd  
 City Cincinnati State OH Zip Code 45208  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) N/A  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 12 / 19 / 2017  
**Transaction ID : SA11AI.5104**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. Zimmerman, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7655 Brill Rd  
 City Cincinnati State OH Zip Code 45243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Taft Stettinius & Hollister LL Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 29 / 2017  
**Transaction ID : SA11AI.5121**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3500.00
<b>TOTAL</b> This Period (last page this line number only).....	71250.00

**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 16 OF 64
<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)  
**Cincinnatus PAC**

**A. ACT Ohio PCE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 222 E Town St

City Columbus	State OH	Zip Code 43215
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	12	/	2017

**Transaction ID : SA11C.5136**

Amount of Each Receipt this Period  
2500.00

Memo Item  
Contribution from Ohio PCE (political contributing entity)

**B. BACPAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 700 Walnut St #450

City Cincinnati	State OH	Zip Code 45202
--------------------	-------------	-------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	18	/	2017

**Transaction ID : SA11C.5151**

Amount of Each Receipt this Period  
2000.00

Memo Item  
Contribution from an Ohio PAC

**C. Cincinnati Firefighters Local 48 PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1011 W 8th St

City Cincinnati	State OH	Zip Code 45203
--------------------	-------------	-------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1900.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	20	/	2017

**Transaction ID : SA11C.5142**

Amount of Each Receipt this Period  
1500.00

Memo Item  
contribution from an Ohio PAC

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6000.00
<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: (check only one)	PAGE 17 OF 64
<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)  
**Cincinnatus PAC**

**A. CINCINNATI SHEET METAL WORKERS PAC FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1579 Summit Road

City Cincinnati	State OH	Zip Code 45237
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2017

**Transaction ID : SA11C.5127**

Amount of Each Receipt this Period  
300.00

Memo Item  
Ohio PAC (OH994)

**B. CODE PCE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 700 W Pete Rose Way

City Cincinnati	State OH	Zip Code 45203
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2017

**Transaction ID : SA11C.5143**

Amount of Each Receipt this Period  
5000.00

Memo Item  
Contribution from an Ohio PCE

**C. Committee to Elect Fred Strahorn**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 531 Belmonte Park

City Dayton	State OH	Zip Code 45406
----------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	02	/	2017

**Transaction ID : SA11C.5125**

Amount of Each Receipt this Period  
1400.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6700.00
<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: (check only one)	PAGE 18 OF 64
<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)  
**Cincinnatus PAC**

**A. Dinsmore & Shohl LLP PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 225 E Fifth St #1900

City Cincinnati	State OH	Zip Code 45202
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 21 / 2017

**Transaction ID : SA11C.5148**

Amount of Each Receipt this Period  
500.00

Memo Item  
Contribution from an Ohio PAC

**B. GRAYDON GOOD GOVERNMENT COMMITTEE**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 553 LASSING WAY

City WALTON	State KY	Zip Code 41094
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00610295

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 15 / 2017

**Transaction ID : SA11C.5140**

Amount of Each Receipt this Period  
3000.00

Memo Item

**C. HUNTINGTON BANCSHARES INC. POLITICAL ACTION COMMITTEE (HBI-PAC)**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 41 S. HIGH STREET

City COLUMBUS	State OH	Zip Code 43287
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00165589

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 12 / 2017

**Transaction ID : SA11C.5133**

Amount of Each Receipt this Period  
2500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6000.00
<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: (check only one)	PAGE 19 OF 64
<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)  
**Cincinnatus PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Laborers Local 265 PCE</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 21 / 2017
Mailing Address 3457 Montgomery Rd			<b>Transaction ID : SA11C.5145</b>
City Cincinnati	State OH	Zip Code 45207	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Contribution from an Ohio PCE	
Name of Employer (for Individual)		Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. UNITED FOOD AND COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 12 / 2017
Mailing Address 1775 K STREET, NW			<b>Transaction ID : SA11C.5131</b>
City WASHINGTON	State DC	Zip Code 20006	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C C00002766		<input type="checkbox"/> Memo Item	
Name of Employer (for Individual)		Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C.</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y
Mailing Address			Amount of Each Receipt this Period
City	State	Zip Code	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual)		Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6000.00
<b>TOTAL</b> This Period (last page this line number only).....	24700.00

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)

**A. FC Cincinnati**

Mailing Address 14 E. 4th St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Event tickets

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 07 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.5158  
Amount of Each Disbursement this Period  
86.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. First Watch**

Mailing Address 700 Walnut Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 07 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.5157  
Amount of Each Disbursement this Period  
30.64

Memo Item

Full Name (Last, First, Middle Initial)

**C. First Watch**

Mailing Address 700 Walnut Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 07 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.5177  
Amount of Each Disbursement this Period  
31.71

Memo Item

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

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

148.35

**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"/> 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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. First Watch</b>			Date of Disbursement MM / DD / YYYY 09 / 27 / 2017	
Mailing Address 700 Walnut Street				
City Cincinnati		State OH	Zip Code 45202	
Purpose of Disbursement Stakeholder meeting			<input type="checkbox"/>	
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) ▼			
State: District:	<input type="checkbox"/> Memo Item			

FEC Identification Number  
**C**

**Transaction ID : SB21B.5264**  
Amount of Each Disbursement this Period  
32.71

Full Name (Last, First, Middle Initial) <b>B. First Watch</b>			Date of Disbursement MM / DD / YYYY 10 / 17 / 2017	
Mailing Address 700 Walnut Street				
City Cincinnati		State OH	Zip Code 45202	
Purpose of Disbursement Stakeholder meeting			<input type="checkbox"/>	
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) ▼			
State: District:	<input type="checkbox"/> Memo Item			

FEC Identification Number  
**C**

**Transaction ID : SB21B.5294**  
Amount of Each Disbursement this Period  
30.46

Full Name (Last, First, Middle Initial) <b>C. First Watch</b>			Date of Disbursement MM / DD / YYYY 12 / 15 / 2017	
Mailing Address 700 Walnut Street				
City Cincinnati		State OH	Zip Code 45202	
Purpose of Disbursement Stakeholder meeting			<input type="checkbox"/>	
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) ▼			
State: District:	<input type="checkbox"/> Memo Item			

FEC Identification Number  
**C**

**Transaction ID : SB21B.5388**  
Amount of Each Disbursement this Period  
32.49

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	95.66
<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"/> 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)  
**Cincinnati PAC**

Full Name (Last, First, Middle Initial) <b>A. Incline Public House</b>		Date of Disbursement MM / DD / YYYY 07 / 24 / 2017	
Mailing Address 2601 W. 8th Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5168</b> Amount of Each Disbursement this Period [ ] 41.24	
City Cincinnati	State OH	Zip Code 45206	Category/Type [ ]
Purpose of Disbursement Stakeholder meeting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Incline Public House</b>		Date of Disbursement MM / DD / YYYY 08 / 07 / 2017	
Mailing Address 2601 W. 8th Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5179</b> Amount of Each Disbursement this Period [ ] 124.79	
City Cincinnati	State OH	Zip Code 45206	Category/Type [ ]
Purpose of Disbursement Stakeholder meeting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Incline Public House</b>		Date of Disbursement MM / DD / YYYY 08 / 28 / 2017	
Mailing Address 2601 W. 8th Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5213</b> Amount of Each Disbursement this Period [ ] 49.73	
City Cincinnati	State OH	Zip Code 45206	Category/Type [ ]
Purpose of Disbursement Stakeholder meeting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 215.76
<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"/> 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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Incline Public House</b>		Date of Disbursement MM / DD / YYYY 09 / 05 / 2017	
Mailing Address 2601 W. 8th Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5219</b> Amount of Each Disbursement this Period [ ] 41.24	
City Cincinnati	State OH	Zip Code 45206	Category/ Type [ ]
Purpose of Disbursement Stakeholder meeting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. Incline Public House</b>		Date of Disbursement MM / DD / YYYY 09 / 11 / 2017	
Mailing Address 2601 W. 8th Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5228</b> Amount of Each Disbursement this Period [ ] 38.10	
City Cincinnati	State OH	Zip Code 45206	Category/ Type [ ]
Purpose of Disbursement Stakeholder meeting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C. Incline Public House</b>		Date of Disbursement MM / DD / YYYY 10 / 10 / 2017	
Mailing Address 2601 W. 8th Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5276</b> Amount of Each Disbursement this Period [ ] 70.78	
City Cincinnati	State OH	Zip Code 45206	Category/ Type [ ]
Purpose of Disbursement Stakeholder meeting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 150.12
<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"/> 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)  
**Cincinnatus PAC**

**A. Incline Public House**

Full Name (Last, First, Middle Initial)  
Mailing Address 2601 W. 8th Street

City Cincinnati State OH Zip Code 45206

Purpose of Disbursement Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
10 / 20 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.5300**

Amount of Each Disbursement this Period: 41.24

Memo Item

**B. Incline Public House**

Full Name (Last, First, Middle Initial)  
Mailing Address 2601 W. 8th Street

City Cincinnati State OH Zip Code 45206

Purpose of Disbursement Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
11 / 07 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.5329**

Amount of Each Disbursement this Period: 92.22

Memo Item

**C. Incline Public House**

Full Name (Last, First, Middle Initial)  
Mailing Address 2601 W. 8th Street

City Cincinnati State OH Zip Code 45206

Purpose of Disbursement Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
12 / 29 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.5398**

Amount of Each Disbursement this Period: 45.52

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 178.98

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)  
**Cincinnati PAC**

Full Name (Last, First, Middle Initial)

### A. J. Alexanders

Mailing Address 2969 Edmonson Rd

City Cincinnati State OH Zip Code 45209

Purpose of Disbursement  
Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 28 / 2017

FEC Identification Number

C

Transaction ID : SB21B.5212

Amount of Each Disbursement this Period

43.33

Memo Item

Full Name (Last, First, Middle Initial)

### B. Manley Burke LPA

Mailing Address 225 W Court St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
legal fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify)

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 13 / 2017

FEC Identification Number

C

Transaction ID : SB21B.5163

Amount of Each Disbursement this Period

730.80

Memo Item

Full Name (Last, First, Middle Initial)

### C. Manley Burke LPA

Mailing Address 225 W Court St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Legal fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 10 / 2017

FEC Identification Number

C

Transaction ID : SB21B.5183

Amount of Each Disbursement this Period

700.00

Memo Item

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

1474.13

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"/> 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)  
**Cincinnatus PAC**

**A. Manley Burke LPA**

Full Name (Last, First, Middle Initial)

Mailing Address 225 W Court St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Legal fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
09 / 13 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.5229**

Amount of Each Disbursement this Period: 700.00

Memo Item

**B. Manley Burke LPA**

Full Name (Last, First, Middle Initial)

Mailing Address 225 W Court St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Legal Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
10 / 11 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.5281**

Amount of Each Disbursement this Period: 700.00

Memo Item

**C. Manley Burke LPA**

Full Name (Last, First, Middle Initial)

Mailing Address 225 W Court St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Legal fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
11 / 08 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.5343**

Amount of Each Disbursement this Period: 700.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2100.00

**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"/> 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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Manley Burke LPA</b>		Date of Disbursement MM / DD / YYYY 12 / 07 / 2017	
Mailing Address 225 W Court St		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5373</b> Amount of Each Disbursement this Period [ ] 500.00	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Legal fees		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) <b>B. McCormick and Schmick's</b>		Date of Disbursement MM / DD / YYYY 07 / 19 / 2017	
Mailing Address 21 E. 5th Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5164</b> Amount of Each Disbursement this Period [ ] 41.88	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Stakeholder meeting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 07 / 01 / 2017	
Mailing Address 224 E 8th St		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5153</b> Amount of Each Disbursement this Period [ ] 185.65	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Strategic Consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

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

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

[ ] 727.53
[ ]

**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"/> 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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)  
**A. Rivertown Strategies, LLC**

Mailing Address 224 E 8th St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Event supplies reimbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 01 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.5154**

Amount of Each Disbursement this Period: 1500.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Rivertown Strategies, LLC**

Mailing Address 224 E 8th St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Strategic consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 12 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.5161**

Amount of Each Disbursement this Period: 831.63

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Rivertown Strategies, LLC**

Mailing Address 224 E 8th St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Event supplies reimbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 12 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.5162**

Amount of Each Disbursement this Period: 1000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3331.63

**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"/> 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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 07 / 26 / 2017	
Mailing Address 224 E 8th St		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5169</b> Amount of Each Disbursement this Period [ ] 687.37	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Event supplies reimbursement		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 07 / 27 / 2017	
Mailing Address 224 E 8th St		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5170</b> Amount of Each Disbursement this Period [ ] 1500.00	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Strategic consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 09 / 2017	
Mailing Address 224 E 8th St		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5180</b> Amount of Each Disbursement this Period [ ] 1583.73	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Strategic consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 3771.10
<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"/> 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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 15 / 2017	
Mailing Address 224 E 8th St		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5190</b> Amount of Each Disbursement this Period [ ] 445.13	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Mileage reimbursement		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 09 / 01 / 2017	
Mailing Address 224 E 8th St		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5217</b> Amount of Each Disbursement this Period [ ] 1500.00	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Strategic consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 09 / 01 / 2017	
Mailing Address 224 E 8th St		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5218</b> Amount of Each Disbursement this Period [ ] 993.70	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Event supplies reimbursement		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 2938.83
<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"/> 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)  
**Cincinnatus PAC**

**A. Rivertown Strategies, LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address 224 E 8th St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement: Event supplies reimbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 09 / 20 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5235

Amount of Each Disbursement this Period: 1355.11

Memo Item

**B. Rivertown Strategies, LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address 224 E 8th St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement: Strategic consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 03 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5267

Amount of Each Disbursement this Period: 1500.00

Memo Item

**C. Rivertown Strategies, LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address 224 E 8th St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement: Event supplies and ticket reimbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 03 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5268

Amount of Each Disbursement this Period: 458.26

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3313.37

**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"/> 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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 19 / 2017	
Mailing Address 224 E 8th St		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5298</b> Amount of Each Disbursement this Period [ ] 1892.36	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Supplies and event ticket reimbursement		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017	
Mailing Address 224 E 8th St		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5320</b> Amount of Each Disbursement this Period [ ] 1500.00	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Strategic consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017	
Mailing Address 224 E 8th St		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5321</b> Amount of Each Disbursement this Period [ ] 791.54	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Event supplies reimbursement		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 4183.90
<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"/>	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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Rivertown Strategies, LLC</b>			Date of Disbursement MM / DD / YYYY 11 / 07 / 2017		
Mailing Address 224 E 8th St			FEC Identification Number C [ ] <b>Transaction ID : SB21B.5336</b> Amount of Each Disbursement this Period [ ] 400.00		
City Cincinnati	State OH	Zip Code 45202	Category/Type [ ]		
Purpose of Disbursement Rent payment reimbursement		Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:	<input type="checkbox"/> Memo Item				

Full Name (Last, First, Middle Initial) <b>B. Rivertown Strategies, LLC</b>			Date of Disbursement MM / DD / YYYY 11 / 20 / 2017		
Mailing Address 224 E 8th St			FEC Identification Number C [ ] <b>Transaction ID : SB21B.5355</b> Amount of Each Disbursement this Period [ ] 1500.00		
City Cincinnati	State OH	Zip Code 45202	Category/Type [ ]		
Purpose of Disbursement Strategic consulting		Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:	<input type="checkbox"/> Memo Item				

Full Name (Last, First, Middle Initial) <b>C. Rivertown Strategies, LLC</b>			Date of Disbursement MM / DD / YYYY 11 / 20 / 2017		
Mailing Address 224 E 8th St			FEC Identification Number C [ ] <b>Transaction ID : SB21B.5357</b> Amount of Each Disbursement this Period [ ] 1741.18		
City Cincinnati	State OH	Zip Code 45202	Category/Type [ ]		
Purpose of Disbursement Event tickets and event supplies reimbursement		Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:	<input type="checkbox"/> Memo Item				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 3641.18
<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"/> 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)  
**Cincinnatus PAC**

**A. Rivertown Strategies, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 224 E 8th St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Strategic consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 11 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5378

Amount of Each Disbursement this Period: 1500.00

Memo Item

**B. Rivertown Strategies, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 224 E 8th St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Legal fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 11 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5379

Amount of Each Disbursement this Period: 2107.50

Memo Item

**C. Sleepy Bee**

Full Name (Last, First, Middle Initial)

Mailing Address 3098 Madison Road

City Cincinnati State OH Zip Code 45209

Purpose of Disbursement Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 24 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5166

Amount of Each Disbursement this Period: 17.11

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3624.61

**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"/> 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)  
**Cincinnatus PAC**

**A. Sleepy Bee**

Full Name (Last, First, Middle Initial)

Mailing Address 3098 Madison Road

City Cincinnati State OH Zip Code 45209

Purpose of Disbursement Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 11 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5184

Amount of Each Disbursement this Period: 26.61

Memo Item

**B. Sleepy Bee**

Full Name (Last, First, Middle Initial)

Mailing Address 3098 Madison Road

City Cincinnati State OH Zip Code 45209

Purpose of Disbursement Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5193

Amount of Each Disbursement this Period: 48.66

Memo Item

**C. Sleepy Bee**

Full Name (Last, First, Middle Initial)

Mailing Address 3098 Madison Road

City Cincinnati State OH Zip Code 45209

Purpose of Disbursement Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 15 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5349

Amount of Each Disbursement this Period: 34.62

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 109.89

**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"/> 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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)

**A. Sleepy Bee**

Mailing Address 3098 Madison Road

City Cincinnati State OH Zip Code 45209

Purpose of Disbursement Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 17 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.5352  
Amount of Each Disbursement this Period  
41.25

Memo Item

Full Name (Last, First, Middle Initial)

**B. Taste of Belgium**

Mailing Address 1135 Vine Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 10 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.5182  
Amount of Each Disbursement this Period  
172.88

Memo Item

Full Name (Last, First, Middle Initial)

**C. Taste of Belgium**

Mailing Address 1135 Vine Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 06 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.5223  
Amount of Each Disbursement this Period  
39.10

Memo Item

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

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

253.23

**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"/> 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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)

**A. Taste of Belgium**

Mailing Address 1135 Vine Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 18 / 2017

FEC Identification Number

C  
**Transaction ID : SB21B.5233**  
Amount of Each Disbursement this Period  
33.97

Memo Item

Full Name (Last, First, Middle Initial)

**B. Taste of Belgium**

Mailing Address 1135 Vine Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 23 / 2017

FEC Identification Number

C  
**Transaction ID : SB21B.5301**  
Amount of Each Disbursement this Period  
37.83

Memo Item

Full Name (Last, First, Middle Initial)

**C. Taste of Belgium**

Mailing Address 1135 Vine Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 27 / 2017

FEC Identification Number

C  
**Transaction ID : SB21B.5306**  
Amount of Each Disbursement this Period  
40.70

Memo Item

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

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

112.50

**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"/> 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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)

**A. Taste of Belgium**

Mailing Address 1135 Vine Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 11 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.5375  
Amount of Each Disbursement this Period  
40.97

Memo Item

Full Name (Last, First, Middle Initial)

**B. The Abercrombie Group**

Mailing Address 10301 Giverny Blvd

City Cincinnati State OH Zip Code 45241

Purpose of Disbursement Event ticket

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify)

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 08 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.5341  
Amount of Each Disbursement this Period  
450.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Uber**

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Travel costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 10 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.5159  
Amount of Each Disbursement this Period  
13.66

Memo Item

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

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

504.63

**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"/> 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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Uber</b>			Date of Disbursement MM / DD / YYYY 07 / 10 / 2017		
Mailing Address 182 Howard St, #8			FEC Identification Number C [ ] <b>Transaction ID : SB21B.5160</b> Amount of Each Disbursement this Period [ ] 14.16		
City San Francisco	State CA	Zip Code 94105	Category/ Type		
Purpose of Disbursement Travel costs		Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State: District:					
Full Name (Last, First, Middle Initial) <b>B. Uber</b>			Date of Disbursement MM / DD / YYYY 07 / 24 / 2017		
Mailing Address 182 Howard St, #8			FEC Identification Number C [ ] <b>Transaction ID : SB21B.5165</b> Amount of Each Disbursement this Period [ ] 12.77		
City San Francisco	State CA	Zip Code 94105	Category/ Type		
Purpose of Disbursement Travel costs		Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State: District:					
Full Name (Last, First, Middle Initial) <b>C. Uber</b>			Date of Disbursement MM / DD / YYYY 07 / 24 / 2017		
Mailing Address 182 Howard St, #8			FEC Identification Number C [ ] <b>Transaction ID : SB21B.5167</b> Amount of Each Disbursement this Period [ ] 22.06		
City San Francisco	State CA	Zip Code 94105	Category/ Type		
Purpose of Disbursement Travel costs		Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State: District:					
<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶			[ ] 48.99		
<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"/> 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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)

### A. Uber

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Travel costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 31 / 2017

FEC Identification Number

C

Transaction ID : SB21B.5173

Amount of Each Disbursement this Period

22.49

Memo Item

Full Name (Last, First, Middle Initial)

### B. Uber

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Travel costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 07 / 2017

FEC Identification Number

C

Transaction ID : SB21B.5176

Amount of Each Disbursement this Period

16.98

Memo Item

Full Name (Last, First, Middle Initial)

### C. Uber

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Travel costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 14 / 2017

FEC Identification Number

C

Transaction ID : SB21B.5185

Amount of Each Disbursement this Period

6.30

Memo Item

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

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

45.77



# 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"/> 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)  
**Cincinnatus PAC**

**A. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Travel costs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 14 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5186

Amount of Each Disbursement this Period: 10.61

Memo Item

**B. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Travel costs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 21 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5194

Amount of Each Disbursement this Period: 5.00

Memo Item

**C. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Travel costs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 21 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5197

Amount of Each Disbursement this Period: 19.95

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 35.56

**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"/> 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)  
**Cincinnatus PAC**

**A. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Travel costs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 28 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5207

Amount of Each Disbursement this Period: 22.40

Memo Item

**B. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Travel Costs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 11 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5224

Amount of Each Disbursement this Period: 2.00

Memo Item

**C. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Travel costs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 11 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5225

Amount of Each Disbursement this Period: 4.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 28.40

**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"/> 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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)

**A. Uber**

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Travel costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 11 / 2017

FEC Identification Number

C  
**Transaction ID : SB21B.5226**  
Amount of Each Disbursement this Period  
8.82

Memo Item

Full Name (Last, First, Middle Initial)

**B. Uber**

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Travel costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 11 / 2017

FEC Identification Number

C  
**Transaction ID : SB21B.5227**  
Amount of Each Disbursement this Period  
8.07

Memo Item

Full Name (Last, First, Middle Initial)

**C. Uber**

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Travel costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2017

FEC Identification Number

C  
**Transaction ID : SB21B.5230**  
Amount of Each Disbursement this Period  
23.78

Memo Item

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

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

38.67

**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"/> 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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Uber</b>		Date of Disbursement MM / DD / YYYY 09 / 18 / 2017	
Mailing Address 182 Howard St, #8		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.5231</b> Amount of Each Disbursement this Period [REDACTED] 4.00	
City San Francisco	State CA	Zip Code 94105	Category/ Type [REDACTED]
Purpose of Disbursement Travel costs		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Uber</b>		Date of Disbursement MM / DD / YYYY 09 / 18 / 2017	
Mailing Address 182 Howard St, #8		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.5232</b> Amount of Each Disbursement this Period [REDACTED] 15.48	
City San Francisco	State CA	Zip Code 94105	Category/ Type [REDACTED]
Purpose of Disbursement Travel costs		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Uber</b>		Date of Disbursement MM / DD / YYYY 09 / 25 / 2017	
Mailing Address 182 Howard St, #8		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.5260</b> Amount of Each Disbursement this Period [REDACTED] 3.00	
City San Francisco	State CA	Zip Code 94105	Category/ Type [REDACTED]
Purpose of Disbursement Travel costs		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 22.48
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

**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"/> 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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Uber</b>			Date of Disbursement MM / DD / YYYY 09 / 25 / 2017	
Mailing Address 182 Howard St, #8			FEC Identification Number C [ ] <b>Transaction ID : SB21B.5261</b> Amount of Each Disbursement this Period [ ] 6.30	
City San Francisco	State CA	Zip Code 94105	Category/Type [ ]	
Purpose of Disbursement Travel costs			Memo Item <input type="checkbox"/>	
Candidate Name			Amount of Each Disbursement this Period [ ] 6.30	
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>B. Uber</b>			Date of Disbursement MM / DD / YYYY 09 / 25 / 2017	
Mailing Address 182 Howard St, #8			FEC Identification Number C [ ] <b>Transaction ID : SB21B.5262</b> Amount of Each Disbursement this Period [ ] 6.54	
City San Francisco	State CA	Zip Code 94105	Category/Type [ ]	
Purpose of Disbursement Travel costs			Memo Item <input type="checkbox"/>	
Candidate Name			Amount of Each Disbursement this Period [ ] 6.54	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:				
Full Name (Last, First, Middle Initial) <b>C. Uber</b>			Date of Disbursement MM / DD / YYYY 09 / 27 / 2017	
Mailing Address 182 Howard St, #8			FEC Identification Number C [ ] <b>Transaction ID : SB21B.5263</b> Amount of Each Disbursement this Period [ ] 30.24	
City San Francisco	State CA	Zip Code 94105	Category/Type [ ]	
Purpose of Disbursement Travel costs			Memo Item <input type="checkbox"/>	
Candidate Name			Amount of Each Disbursement this Period [ ] 30.24	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:				
<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶			[ ] 43.08	
<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"/> 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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)

**A. Uber**

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Travel costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 29 / 2017

FEC Identification Number

C  
**Transaction ID : SB21B.5266**  
Amount of Each Disbursement this Period  
4.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Uber**

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Travel Costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify)

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 16 / 2017

FEC Identification Number

C  
**Transaction ID : SB21B.5284**  
Amount of Each Disbursement this Period  
4.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Uber**

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Travel costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 16 / 2017

FEC Identification Number

C  
**Transaction ID : SB21B.5285**  
Amount of Each Disbursement this Period  
5.00

Memo Item

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

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

13.00

# 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)  
**Cincinnatus PAC**

**A. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Travel costs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 16 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5286

Amount of Each Disbursement this Period: 11.15

Memo Item

**B. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Travel costs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 16 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5287

Amount of Each Disbursement this Period: 24.30

Memo Item

**C. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Travel costs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 16 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5291

Amount of Each Disbursement this Period: 77.21

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 112.66

**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"/> 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)  
**Cincinnatus PAC**

**A. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Travel costs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 17 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5295

Amount of Each Disbursement this Period: 32.99

Memo Item

**B. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Travel costs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 20 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5299

Amount of Each Disbursement this Period: 2.00

Memo Item

**C. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Travel costs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 27 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5307

Amount of Each Disbursement this Period: 41.74

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 76.73

**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"/> 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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Uber</b>			Date of Disbursement M M / D D / Y Y Y Y Y Y 10 / 30 / 2017		
Mailing Address 182 Howard St, #8					
City San Francisco		State CA	Zip Code 94105		
Purpose of Disbursement Travel costs		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) ▼			
State: District:				FEC Identification Number C <b>Transaction ID : SB21B.5312</b> Amount of Each Disbursement this Period 4.00 <input type="checkbox"/> Memo Item	
Full Name (Last, First, Middle Initial) <b>B. Uber</b>			Date of Disbursement M M / D D / Y Y Y Y Y Y 10 / 31 / 2017		
Mailing Address 182 Howard St, #8					
City San Francisco		State CA	Zip Code 94105		
Purpose of Disbursement Travel costs		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) ▼			
State: District:				FEC Identification Number C <b>Transaction ID : SB21B.5318</b> Amount of Each Disbursement this Period 14.18 <input type="checkbox"/> Memo Item	
Full Name (Last, First, Middle Initial) <b>C. Uber</b>			Date of Disbursement M M / D D / Y Y Y Y Y Y 11 / 03 / 2017		
Mailing Address 182 Howard St, #8					
City San Francisco		State CA	Zip Code 94105		
Purpose of Disbursement Travel costs		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) ▼			
State: District:				FEC Identification Number C <b>Transaction ID : SB21B.5323</b> Amount of Each Disbursement this Period 2.00 <input type="checkbox"/> Memo Item	
<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶			20.18		
<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"/> 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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Uber</b>		Date of Disbursement MM / DD / YYYY 11 / 03 / 2017	
Mailing Address 182 Howard St, #8		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5324</b> Amount of Each Disbursement this Period [ ] 122.67	
City San Francisco	State CA	Zip Code 94105	Category/ Type [ ]
Purpose of Disbursement Travel costs		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. Uber</b>		Date of Disbursement MM / DD / YYYY 11 / 07 / 2017	
Mailing Address 182 Howard St, #8		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5325</b> Amount of Each Disbursement this Period [ ] 4.00	
City San Francisco	State CA	Zip Code 94105	Category/ Type [ ]
Purpose of Disbursement Travel costs		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. Uber</b>		Date of Disbursement MM / DD / YYYY 11 / 08 / 2017	
Mailing Address 182 Howard St, #8		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5339</b> Amount of Each Disbursement this Period [ ] 11.24	
City San Francisco	State CA	Zip Code 94105	Category/ Type [ ]
Purpose of Disbursement Travel costs		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 137.91
<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"/> 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)  
**Cincinnatus PAC**

**A. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Travel costs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 08 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5340

Amount of Each Disbursement this Period: 17.61

Memo Item

**B. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Travel costs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 27 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5361

Amount of Each Disbursement this Period: 15.92

Memo Item

**C. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Travel costs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 27 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5362

Amount of Each Disbursement this Period: 11.34

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 44.87

**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"/> 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)  
**Cincinnatus PAC**

**A. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Travel costs

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 27 / 2017

FEC Identification Number: C  
**Transaction ID : SB21B.5363**  
Amount of Each Disbursement this Period: 3.00

Memo Item

**B. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Travel costs

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 27 / 2017

FEC Identification Number: C  
**Transaction ID : SB21B.5364**  
Amount of Each Disbursement this Period: 2.00

Memo Item

**C. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Travel costs

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 04 / 2017

FEC Identification Number: C  
**Transaction ID : SB21B.5366**  
Amount of Each Disbursement this Period: 20.45

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 25.45

**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"/> 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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)

**A. Uber**

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Travel costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 04 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.5367  
Amount of Each Disbursement this Period  
12.52

Memo Item

Full Name (Last, First, Middle Initial)

**B. Uber**

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Travel costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 04 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.5368  
Amount of Each Disbursement this Period  
6.30

Memo Item

Full Name (Last, First, Middle Initial)

**C. Uber**

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Travel costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 04 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.5369  
Amount of Each Disbursement this Period  
3.00

Memo Item

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

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

21.82

**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"/> 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)  
**Cincinnatus PAC**

**A. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Travel costs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 04 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5370

Amount of Each Disbursement this Period: 3.00

Memo Item

**B. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Travel costs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 04 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5371

Amount of Each Disbursement this Period: 3.00

Memo Item

**C. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Travel costs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 07 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5372

Amount of Each Disbursement this Period: 40.31

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 46.31

**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"/> 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)  
**Cincinnatus PAC**

**A. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Travel costs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 11 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5376

Amount of Each Disbursement this Period: 28.37

Memo Item

**B. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Travel costs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 11 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5377

Amount of Each Disbursement this Period: 5.00

Memo Item

**C. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Travel costs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 12 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5384

Amount of Each Disbursement this Period: 55.99

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 89.36

**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"/> 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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Uber</b>			Date of Disbursement M M / D D / Y Y Y Y Y 12 / 12 / 2017		
Mailing Address 182 Howard St, #8					
City San Francisco	State CA	Zip Code 94105			
Purpose of Disbursement Travel costs		<input type="text"/>		FEC Identification Number C <input type="text"/>	
Candidate Name		Category/Type		Transaction ID : <b>SB21B.5385</b> Amount of Each Disbursement this Period <input type="text"/> 20.24	
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) ▼		<input type="checkbox"/> Memo Item		
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Uber</b>			Date of Disbursement M M / D D / Y Y Y Y Y 12 / 18 / 2017		
Mailing Address 182 Howard St, #8					
City San Francisco	State CA	Zip Code 94105			
Purpose of Disbursement Travel costs		<input type="text"/>		FEC Identification Number C <input type="text"/>	
Candidate Name		Category/Type		Transaction ID : <b>SB21B.5394</b> Amount of Each Disbursement this Period <input type="text"/> 6.30	
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) ▼		<input type="checkbox"/> Memo Item		
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Uber</b>			Date of Disbursement M M / D D / Y Y Y Y Y 12 / 18 / 2017		
Mailing Address 182 Howard St, #8					
City San Francisco	State CA	Zip Code 94105			
Purpose of Disbursement Travel costs		<input type="text"/>		FEC Identification Number C <input type="text"/>	
Candidate Name		Category/Type		Transaction ID : <b>SB21B.5395</b> Amount of Each Disbursement this Period <input type="text"/> 6.48	
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) ▼		<input type="checkbox"/> Memo Item		
State: District:					

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

33.02

**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"/> 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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Uber</b>		Date of Disbursement MM / DD / YYYY 12 / 21 / 2017
Mailing Address 182 Howard St, #8		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5397</b> Amount of Each Disbursement this Period [ ] 11.28
City San Francisco	State CA	Zip Code 94105
Purpose of Disbursement Travel costs		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Urban League of SW Ohio</b>		Date of Disbursement MM / DD / YYYY 08 / 16 / 2017
Mailing Address 3458 Reading Rd		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5191</b> Amount of Each Disbursement this Period [ ] 300.00
City Cincinnati	State OH	Zip Code 45229
Purpose of Disbursement Event ticket		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Via Vite</b>		Date of Disbursement MM / DD / YYYY 07 / 05 / 2017
Mailing Address 520 Vine St		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5155</b> Amount of Each Disbursement this Period [ ] 41.19
City Cincinnati	State OH	Zip Code 45202
Purpose of Disbursement Stakeholder Meeting		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 352.47
<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"/> 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)  
**Cincinnatus PAC**

**A. Via Vite**

Full Name (Last, First, Middle Initial)

Mailing Address 520 Vine St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 07 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5178

Amount of Each Disbursement this Period: 45.40

Memo Item

**B. Via Vite**

Full Name (Last, First, Middle Initial)

Mailing Address 520 Vine St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 25 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5302

Amount of Each Disbursement this Period: 49.69

Memo Item

**C. Via Vite**

Full Name (Last, First, Middle Initial)

Mailing Address 520 Vine St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 16 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5351

Amount of Each Disbursement this Period: 43.33

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 138.42

**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"/> 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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Washington Platform</b>		Date of Disbursement MM / DD / YYYY 08 / 17 / 2017	
Mailing Address 1000 Elm St		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.5192</b> Amount of Each Disbursement this Period [REDACTED] 32.22	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [REDACTED]
Purpose of Disbursement Stakeholder meeting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Washington Platform</b>		Date of Disbursement MM / DD / YYYY 12 / 18 / 2017	
Mailing Address 1000 Elm St		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.5396</b> Amount of Each Disbursement this Period [REDACTED] 14.77	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [REDACTED]
Purpose of Disbursement Stakeholder meeting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Xavier University</b>		Date of Disbursement MM / DD / YYYY 12 / 12 / 2017	
Mailing Address 3800 Viictory Parkway		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.5380</b> Amount of Each Disbursement this Period [REDACTED] 300.00	
City Cincinnati	State OH	Zip Code 45207	Category/ Type [REDACTED]
Purpose of Disbursement Event ticket		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 346.99
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED] 32597.54

# 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"/> 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)  
**Cincinnatus PAC**

**A. JOHN BARTLETT FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 3544

City WAYNE State NJ Zip Code 07474

Purpose of Disbursement Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: NJ District: 11

Date of Disbursement: 10 / 06 / 2017

FEC Identification Number: C 00649673

Transaction ID : SB23.5272

Amount of Each Disbursement this Period: 250.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

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:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

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:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	250.00

**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"/> 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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Cheerleaders 4 Ozzie Davis</b>		Date of Disbursement MM / DD / YYYY 11 / 07 / 2017	
Mailing Address 2612 Vine St		FEC Identification Number C [ ] <b>Transaction ID : SB29.5332</b> Amount of Each Disbursement this Period [ ] 1000.00	
City Cincinnati	State OH	Zip Code 45219	Category/ Type [ ]
Purpose of Disbursement Contribution		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Cranley for Cincinnati</b>		Date of Disbursement MM / DD / YYYY 11 / 07 / 2017	
Mailing Address PO Box 413		FEC Identification Number C [ ] <b>Transaction ID : SB29.5334</b> Amount of Each Disbursement this Period [ ] 2700.00	
City Cincinnati	State OH	Zip Code 45201	Category/ Type [ ]
Purpose of Disbursement Contribution		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Friends of Frondorf</b>		Date of Disbursement MM / DD / YYYY 10 / 27 / 2017	
Mailing Address 2853 Fischer Place		FEC Identification Number C [ ] <b>Transaction ID : SB29.5309</b> Amount of Each Disbursement this Period [ ] 1000.00	
City Cincinnati	State OH	Zip Code 45211	Category/ Type [ ]
Purpose of Disbursement Contribution		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 4700.00
<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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)  
**Cincinnatus PAC**

**A. Friends of Lesley Jones**

Full Name (Last, First, Middle Initial)  
Mailing Address 2651 W North Bend Road

City Cincinnati State OH Zip Code 45329

Purpose of Disbursement Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 11 / 07 / 2017

FEC Identification Number: C  
Transaction ID : SB29.5330  
Amount of Each Disbursement this Period: 1000.00

Memo Item

**B. Friends of Nan Whaley**

Full Name (Last, First, Middle Initial)  
Mailing Address 443 E 6th St

City Dayton State OH Zip Code 45402

Purpose of Disbursement Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 27 / 2017

FEC Identification Number: C  
Transaction ID : SB29.5392  
Amount of Each Disbursement this Period: 1000.00

Memo Item

**C. Garry for Council**

Full Name (Last, First, Middle Initial)  
Mailing Address 178 Woolper Ave

City Cincinnati State OH Zip Code 45220

Purpose of Disbursement Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 11 / 02 / 2017

FEC Identification Number: C  
Transaction ID : SB29.5322  
Amount of Each Disbursement this Period: 2000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 4000.00

**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"/> 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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Hamilton County Democratic Party</b>		Date of Disbursement MM / DD / YYYY 09 / 21 / 2017
Mailing Address 6109 Webbland Place		FEC Identification Number C <b>Transaction ID : SB29.5237</b> Amount of Each Disbursement this Period 1500.00
City Cincinnati	State OH	
Zip Code 45213	Purpose of Disbursement Contribution	Memo Item <input type="checkbox"/>
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) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Keep Karl Keith Auditor</b>		Date of Disbursement MM / DD / YYYY 12 / 12 / 2017
Mailing Address 431 Topton Dr		FEC Identification Number C <b>Transaction ID : SB29.5382</b> Amount of Each Disbursement this Period 250.00
City Vandalia	State OH	
Zip Code 45377	Purpose of Disbursement Contribution	Memo Item <input type="checkbox"/>
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) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Landsman for Cincinnati</b>		Date of Disbursement MM / DD / YYYY 10 / 19 / 2017
Mailing Address 5187 Adena Trail		FEC Identification Number C <b>Transaction ID : SB29.5297</b> Amount of Each Disbursement this Period 1700.00
City Cincinnati	State OH	
Zip Code 45230	Purpose of Disbursement Contribution	Memo Item <input type="checkbox"/>
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) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3450.00
<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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Ohio Democratic Party</b>		Date of Disbursement MM / DD / YYYY 10 / 25 / 2017
Mailing Address 340 E. Fulton Street		FEC Identification Number C [ ] <b>Transaction ID : SB29.5303</b> Amount of Each Disbursement this Period 10000.00
City Columbus	State OH	Zip Code 43215
Purpose of Disbursement Contribution		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Re-elect Dusty Rhodes</b>		Date of Disbursement MM / DD / YYYY 12 / 18 / 2017
Mailing Address 5654 Alomar Dr		FEC Identification Number C [ ] <b>Transaction ID : SB29.5390</b> Amount of Each Disbursement this Period 1000.00
City Cincinnati	State OH	Zip Code 45238
Purpose of Disbursement Contribution		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Team Moroski</b>		Date of Disbursement MM / DD / YYYY 10 / 30 / 2017
Mailing Address 400 Pike St		FEC Identification Number C [ ] <b>Transaction ID : SB29.5317</b> Amount of Each Disbursement this Period 1000.00
City Cincinnati	State OH	Zip Code 45202
Purpose of Disbursement Contribution		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

12000.00

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

24150.00