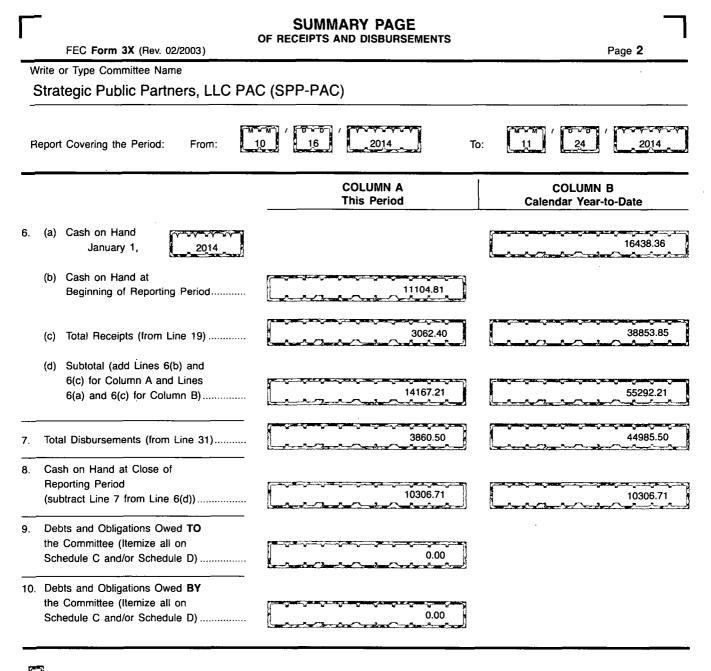
| | | | | | | | | PAGE | 1 / 16 |
|--|--------------------------------------|---|----------------------------|-----------------------------|----------------------------|----------------|------------------------------------|--------------------|--|
| FEC FORM 3X | ANI | PORT O DISBL her Than An | JRSEN | IENT | s | , | REC -8 Office Us | | |
| 1. NAME OF COMMITTEE (in | | OR PRINT V | | nple: If typi the lines. | ing, type | 12FÉ4M | 5 5 | | |
| Strategic Public | c Partners, Ll | | P-PAC) | I. I. I. | | <u> </u> | . I L | | |
| | | <u>I. I. I. J. I. I.</u> | <u> </u> | <u>↓</u> | | <u> </u> | | | |
| ADDRESS (number an | | . Broad Street | | | <u></u> | <u>1 1 1 1</u> | | | |
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| 2. FEC IDENTIFIC | ATION NUMBER | ₩ | | | 5 | STATE 🔺 | | ZIP CODE | ≡ ▲ |
| C C0049934 | 3 | : | 3. IS THIS REPORT | | NEW (N) OR | | AMENDED A) | | |
| 4. TYPE OF REF (Choose One) (a) Quarterly Rep | | Monthly Report Due On: | Feb 20 (M2) Mar 20 (M3) | | May 20 (M5) Jun 20 (M6) | | ıg 20 (M8) :p 20 (M9) | | Nov 20 (M11) Non-Election 'ear Only) Dec 20 (M12) Non-Election 'ear Only) |
| April 15 Quarteri July 15 Quarteri October | y Report (Q1) y Report (Q2) 15 | (C) 12-Day PRE-Election Report for th | n 🖼 | Primary (12 Convention | | Genera | et 20 (M10) al (12G) I (12S) | | lan 31 (YE) Runoff (12R) |
| January Year-End | d Report (YE) | | lection on | (1) | | ╲ <u>┶</u> | | in the State of | |
| Report (Year On | Non-election | (d) 30-Day POST-Electi Report for th | <u> </u> | General (30 | G) | Runoff | (30R) | in the State of | pecial (30S) |
| 5. Covering Period | 10 | | 014 | through | 11 | / D D D | 201 | 4 | |
| I certify that I have e | xamined this Repo | ort and to the be | st of my know | vledge and | belief it is tru | ie, correct a | and complet | e. | |
| Type or Print Name of Signature of Treasure | Natalia Baua | alie Baur Mate | alie/ | ha | W | Date 12 | M / 03 | | 2014 |
| NOTE: Submission of | false, erroneous, o | r incomplete infor | mation may su | bject the pe | rson signing th | nis Report to | the penaltie | es of 2 U. | S.C. §437g. |
| Office Use Only | | | | | | | | FORN | - |

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FE6AN026



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

| Г | DETAILED SUMMARY PAGE of Receipts | |
|--|--|---------------------------------------|
| FEC Form 3X (Rev. 06/2004) | | Page 3 |
| Write or Type Committee Name | | |
| Strategic Public Partners, LLC PA | AC (SPP-PAC) | |
| Report Covering the Period: From: | | o: 11 / 24 / 2014 |
| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
| 11. Contributions (other than loans) From: | | · · · · · · · · · · · · · · · · · · · |
| (a) Individuals/Persons Other | | |
| Than Political Committees | 3041.56 | 37438.92 |
| (i) Itemized (use Schedule A) | | |
| (ii) Unitemized | 20.84_ | 1414.93 |
| (iii) TOTAL (add | | |
| Lines 11(a)(i) and (ii)► | 3062.40 | 38853.85 |
| | | 0.00 |
| (b) Political Party Committees | 0.00 | |
| (c) Other Political Committees (such as PACs) | 0.00 | 0.00 |
| (d) Total Contributions (add Lines | | |
| 11(a)(iii), (b), and (c)) (Carry | | |
| Totals to Line 33, page 5) | 3062.40 | 38853.85 |
| 12. Transfers From Affiliated/Other | | |
| Party Committees | 0.00 | |
| 13. All Loans Received | 0.00 | 0.00 |
| 13. Al Luans neceived | Later and the second | |
| 14. Loan Repayments Received | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures | | |
| (Refunds, Rebates, etc.) | and the second | |
| (Carry Totals to Line 37, page 5) | 0.00 | 0.00 |
| 16. Refunds of Contributions Made | | |
| to Federal Candidates and Other | | 0.00 |
| Political Committees 17. Other Federal Receipts | 0.00 | |
| (Dividends, Interest, etc.) | 0.00 | 0.00 |
| 18. Transfers from Non-Federal and Levin Fun | | |
| (a) Non-Federal Account | | |
| (from Schedule H3) | 0.00 | 0.00 |
| | | |
| (b) Levin Funds (from Schedule H5) | | 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)) | 3062.40 | 38853.85 |
| | | |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)► | 3062.40 | 38853.85 |
| 1 | | |

i

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. Disbursements

| CC | DLUM | N A | |
|-------|------|--------|--|
| Total | This | Period | |

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COLUMN B Calendar Year-to-Date

Page 4

# Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4) (i) Federal Share .....

# (ii) Non-Federal Share.....

- (b) Other Federal Operating Expenditures .....
- (c) Total Operating Expenditures
   (add 21(a)(i), (a)(ii), and (b)) ......
   22. Transfers to Affiliated/Other Party
- Federal Candidates/Committees and Other Political Committees...... 24. Independent Expenditures
- (use Schedule E) ..... 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....
- 26. Loan Repayments Made.....

#### 

- (b) Political Party Committees .....
- (c) Other Political Committees (such as PACs).....
- (d) Total Contribution Refunds(add Lines 28(a), (b), and (c))......
- 29. Other Disbursements .....

### 30. Federal Election Activity (2 U.S.C. §431(20))

- (a) Allocated Federal Election Activity
   (from Schedule H6)
   (i) Federal Share .....
- (ii) "Levin" Share.....(b) Federal Election Activity Paid Entirely With Federal Funds .....
- (c) Total Federal Election Activity (add ... Lines 30(a)(i), 30(a)(ii) and 30(b)).... ►
- Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))...
- Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....

| <u> </u> | <u></u>            | *^_  | ^        |      | _ |
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# **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

# III. Net Contributions/Operating Expenditures

# COLUMN A **Total This Period**

COLUMN B Calendar Year-to-Date

Page 5

- 33. Total Contributions (other than loans) (from Line 11(d), page 3) ..... 34. Total Contribution Refunds
- (from Line 28(d)) ..... 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) ..... 36. Total Federal Operating Expenditures
- (add Line 21(a)(i) and Line 21(b)) ...... >
- 37. Offsets to Operating Expenditures (from Line 15, page 3)..... 38. Net Operating Expenditures (subtract Line 37 from Line 36) ......

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| S                 | HEDULE A (FEC Form 3X)                                                                         |                          |                       | FO | R LINE         | NU    | MBER                    | : F              | AGE                                    | 6 (      | )F         | 16  |  |  |
|-------------------|------------------------------------------------------------------------------------------------|--------------------------|-----------------------|----|----------------|-------|-------------------------|------------------|----------------------------------------|----------|------------|-----|--|--|
|                   | EMIZED RECEIPTS                                                                                | Use separate schedule(s) |                       |    |                |       | (check only one)        |                  |                                        |          |            |     |  |  |
|                   |                                                                                                |                          | Detailed Summary Page |    | < 11a          |       | 11b                     | 11               | c [                                    | 12       | _          | ,   |  |  |
| <u>.</u>          |                                                                                                |                          |                       |    | 13             |       | 14                      | 15               |                                        | 16       |            | 17  |  |  |
|                   | y information copied from such Reports and SI<br>for commercial purposes, other than using the |                          |                       |    |                |       |                         |                  |                                        |          |            |     |  |  |
|                   | NAME OF COMMITTEE (In Full)                                                                    |                          |                       |    |                |       |                         |                  |                                        |          |            |     |  |  |
| $\langle \rangle$ | Strategic Public Partners, LLC F                                                               | PAC (SPI                 | P-PAC)                |    |                |       |                         |                  |                                        |          |            |     |  |  |
| Α.                | Full Name (Last, First, Middle Initial)<br>Mr. John Campbell                                   |                          |                       |    | Date o         | f Re  | ceipt                   |                  |                                        |          |            |     |  |  |
|                   | Mailing Address 210 Lantern Lane                                                               |                          |                       |    | M M            | 1     | 30                      | ชา /<br>)        |                                        | 2014     |            |     |  |  |
|                   | City                                                                                           | State                    | Zip Code              |    | Trans          | sacti | on ID                   | : SA1            | AI.57                                  | 25       |            |     |  |  |
|                   | Plain City                                                                                     | ОН                       | 43215                 |    | Amoun          |       |                         |                  |                                        | Perio    |            |     |  |  |
|                   | FEC ID number of contributing federal political committee.                                     | C                        |                       |    |                | ~~    | ~~~~<br>}               |                  |                                        | -        | 8.33       |     |  |  |
|                   | Name of Employer                                                                               | Occupation               |                       |    |                |       |                         |                  |                                        |          |            |     |  |  |
|                   | Strategic Public Partners LLC                                                                  | Executive \              | /ice President        |    |                |       |                         |                  |                                        |          |            |     |  |  |
|                   | Receipt For:                                                                                   |                          | Year-to-Date <b>V</b> |    |                |       |                         |                  |                                        |          |            |     |  |  |
|                   | Other (specify)                                                                                |                          | 4166.60               |    |                |       |                         |                  |                                        |          |            |     |  |  |
|                   |                                                                                                |                          |                       | -8 |                |       |                         |                  |                                        |          |            |     |  |  |
| в.                | Full Name (Last, First, Middle Initial)<br>Mr. John Campbell                                   |                          |                       |    |                |       | ceipt                   |                  |                                        |          |            |     |  |  |
|                   | Mailing Address 210 Lantern Lane                                                               |                          |                       |    |                |       | LECEN / LECEN / LACASSA |                  |                                        |          |            |     |  |  |
|                   | City                                                                                           | _                        | <u>_1</u>             | J  | ال             |       | Deer C                  | 2014             | لي                                     |          |            |     |  |  |
|                   | Plain City                                                                                     | State<br>OH              | Zip Code<br>43215     |    | Trans<br>Amoun |       |                         | : SA11<br>Receir |                                        |          | 4          |     |  |  |
|                   | FEC ID number of contributing                                                                  |                          |                       |    |                |       |                         |                  |                                        |          |            | - 7 |  |  |
|                   | federal political committee.                                                                   |                          |                       |    |                | مرير  | 5                       |                  | 1                                      |          | 8.33       |     |  |  |
|                   | Name of Employer<br>Strategic Public Partners LLC                                              | Occupation               |                       |    |                |       |                         |                  |                                        |          |            |     |  |  |
|                   | Receipt For:                                                                                   |                          | /ice President        |    |                |       |                         |                  |                                        |          |            |     |  |  |
|                   | Primary General                                                                                | Aggregate                | Year-to-Date ♥        |    |                |       |                         |                  |                                        |          |            |     |  |  |
|                   | Other (specify)                                                                                |                          | 4374.93               |    |                |       |                         |                  |                                        |          |            |     |  |  |
| С.                | Full Name (Last, First, Middle Initial)                                                        |                          |                       |    | Date o         | of Re | ceipt                   |                  |                                        |          |            |     |  |  |
|                   | Mailing Address 966 Dunmore Ct                                                                 |                          |                       |    | 10             |       | <u>в</u><br>З           |                  | 1                                      | 2014     | - <b>T</b> |     |  |  |
|                   | City                                                                                           | State                    | Zip Code              |    | Tran           | sact  | on ID                   | : SA1            | 1AI.5                                  | 726      |            |     |  |  |
|                   | Pickerington                                                                                   | ОН                       | 43147                 |    | Amour          |       |                         | Receip           |                                        |          | d          |     |  |  |
|                   | FEC ID number of contributing federal political committee.                                     | C                        |                       |    |                |       |                         |                  | ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ | -        | 1.66       |     |  |  |
|                   | Name of Employer                                                                               | Occupation               | 1                     |    |                |       |                         |                  |                                        |          |            |     |  |  |
|                   | Strategic Public Partners                                                                      | Associate                |                       |    |                |       |                         |                  |                                        |          |            |     |  |  |
|                   | Receipt For:                                                                                   | Aggregate                | Year-to-Date <b>V</b> |    |                |       |                         |                  |                                        |          |            |     |  |  |
|                   | Other (specify) V                                                                              |                          | 853.20                |    |                |       |                         |                  |                                        | ,        |            |     |  |  |
| Γ                 |                                                                                                |                          |                       |    |                |       |                         | وروري            |                                        | -        | 3.32       |     |  |  |
| $\vdash$          | <b>OTAL</b> This Period (last page this line number of                                         | • •                      |                       | •  |                |       |                         |                  | <u>.</u>                               |          |            |     |  |  |
| Ľ                 |                                                                                                | ···· <b>j</b> /······    |                       | •  | 6              |       | ) <del></del>           | <u>~</u>         | <u>~</u>                               | <u> </u> | <u>^</u> ^ |     |  |  |

| S            | CHEDULE A (FEC Form 3X)                                                                         | 1                                                        |                                                      | FOR LINE NUMBER: PAGE 7 OF 16                    |  |  |  |  |  |  |
|--------------|-------------------------------------------------------------------------------------------------|----------------------------------------------------------|------------------------------------------------------|--------------------------------------------------|--|--|--|--|--|--|
| ΙТ           | EMIZED RECEIPTS                                                                                 |                                                          | Use separate schedule(s)<br>for each category of the | (check only one)                                 |  |  |  |  |  |  |
|              |                                                                                                 |                                                          | Detailed Summary Page                                | $\mathbf{X}$ 11a 11b 11c 12<br>13 14 15 16 17    |  |  |  |  |  |  |
|              | y information copied from such Reports and Sta<br>for commercial purposes, other than using the |                                                          |                                                      | rson for the purpose of soliciting contributions |  |  |  |  |  |  |
| Ν            | NAME OF COMMITTEE (In Full)                                                                     |                                                          |                                                      |                                                  |  |  |  |  |  |  |
| $\mathbb{Z}$ | Strategic Public Partners, LLC P                                                                | AC (SPI                                                  | D-PAC)                                               |                                                  |  |  |  |  |  |  |
| Α.           | Nicole Campbell                                                                                 | II Name (Last, First, Middle Initial)<br>licole Campbell |                                                      |                                                  |  |  |  |  |  |  |
|              | Mailing Address 966 Dunmore Ct                                                                  |                                                          |                                                      | 11 15 2014                                       |  |  |  |  |  |  |
|              | City<br>Pickerington                                                                            | State<br>OH                                              | Zip Code<br>43147                                    | Transaction ID : SA11AI.5712                     |  |  |  |  |  |  |
|              |                                                                                                 |                                                          |                                                      | Amount of Each Receipt this Period               |  |  |  |  |  |  |
|              | FEC ID number of contributing federal political committee.                                      | C                                                        |                                                      | 41.66                                            |  |  |  |  |  |  |
|              | Name of Employer                                                                                | Occupation                                               | 1                                                    |                                                  |  |  |  |  |  |  |
|              | Strategic Public Partners Receipt For:                                                          | Associate                                                |                                                      | _                                                |  |  |  |  |  |  |
|              | Primary General                                                                                 | 00 0                                                     | Year-to-Date ▼                                       |                                                  |  |  |  |  |  |  |
|              | Other (specify)                                                                                 |                                                          | 894.86                                               |                                                  |  |  |  |  |  |  |
| В.           | Full Name (Last, First, Middle Initial)<br>Ken Collins                                          | <u> </u>                                                 |                                                      | Date of Receipt                                  |  |  |  |  |  |  |
|              | Mailing Address 90 Park Dr.                                                                     |                                                          |                                                      |                                                  |  |  |  |  |  |  |
|              | City                                                                                            | State Zip Code                                           |                                                      |                                                  |  |  |  |  |  |  |
|              | Columbus                                                                                        | OH                                                       | 43209                                                | Amount of Each Receipt this Period               |  |  |  |  |  |  |
|              | FEC ID number of contributing<br>federal political committee.                                   | C                                                        |                                                      | 208.33                                           |  |  |  |  |  |  |
|              | Name of Employer                                                                                | Occupation                                               | 1                                                    | -                                                |  |  |  |  |  |  |
|              | Strategic Public Partners.                                                                      | Senior Man                                               | ager                                                 | _                                                |  |  |  |  |  |  |
|              | Receipt For:                                                                                    | Aggregate                                                | Year-to-Date V                                       |                                                  |  |  |  |  |  |  |
|              | Other (specify) ▼                                                                               |                                                          | <u>4166.60</u>                                       |                                                  |  |  |  |  |  |  |
| . <u> </u>   | Full Name (Last, First, Middle Initial)<br>Ken Collins                                          |                                                          |                                                      | Date of Receipt                                  |  |  |  |  |  |  |
| υ.           | Mailing Address 90 Park Dr.                                                                     |                                                          |                                                      |                                                  |  |  |  |  |  |  |
|              | City                                                                                            | State                                                    | Zip Code                                             | Transaction ID : SA11AI.5713                     |  |  |  |  |  |  |
|              | Columbus                                                                                        | OH                                                       | 43209                                                | Amount of Each Receipt this Period               |  |  |  |  |  |  |
|              | FEC ID number of contributing<br>federal political committee.                                   | C                                                        |                                                      | 208.33                                           |  |  |  |  |  |  |
|              | Name of Employer                                                                                | Occupation                                               | 1                                                    |                                                  |  |  |  |  |  |  |
|              | Strategic Public Partners                                                                       | Senior Mar                                               |                                                      | _                                                |  |  |  |  |  |  |
|              | Receipt For:                                                                                    |                                                          | Year-to-Date V                                       |                                                  |  |  |  |  |  |  |
|              | Other (specify) ▼                                                                               |                                                          | 4374.93                                              |                                                  |  |  |  |  |  |  |
| [            | UBTOTAL of Receipts This Page (optional)                                                        |                                                          |                                                      | 458.32                                           |  |  |  |  |  |  |
|              | OTAL This Period (last page this line number o                                                  | only)                                                    | ••••••••••••••••••••••••••••••••••••••               |                                                  |  |  |  |  |  |  |

FEC Schedule A (Form 3X) Rev. 02/2003

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| SCHEDULE A (FEC Form 3X) |                                                                                                    |                                                    |                                        |     | FOR LINE NUMBER: PAGE 8 OF 16<br>(check only one) |      |            |          |           |                 |               |               |          |  |  |  |  |
|--------------------------|----------------------------------------------------------------------------------------------------|----------------------------------------------------|----------------------------------------|-----|---------------------------------------------------|------|------------|----------|-----------|-----------------|---------------|---------------|----------|--|--|--|--|
| IT                       | EMIZED RECEIPTS                                                                                    | · · · · · · · · · · · · · · · ·                    |                                        |     |                                                   |      |            | _        | 1         |                 | 1             |               |          |  |  |  |  |
|                          |                                                                                                    |                                                    | Detailed Summary Page                  | ΙĤ  | 11a<br>13                                         | Н    | 11b<br>14  | $\vdash$ | 11c<br>15 |                 | 12<br>16      |               | ]17      |  |  |  |  |
|                          | y information copied from such Reports and S<br>for commercial purposes, other than using the      |                                                    |                                        |     | r the                                             |      | iose d     |          | oliciting |                 | ntribu        |               | <u> </u> |  |  |  |  |
| $\overline{\ }$          | NAME OF COMMITTEE (In Full)                                                                        |                                                    |                                        |     |                                                   |      |            |          |           |                 |               |               |          |  |  |  |  |
| Z                        | Strategic Public Partners, LLC F                                                                   | PAC (SPI                                           | P-PAC)                                 |     |                                                   |      |            |          |           |                 |               |               |          |  |  |  |  |
| Α.                       | Linda Hays                                                                                         | II Name (Last, First, Middle Initial)<br>inda Hays |                                        |     |                                                   |      |            |          |           | Date of Receipt |               |               |          |  |  |  |  |
|                          | Mailing Address 4526 Faneuil Hall Place.                                                           |                                                    |                                        |     |                                                   |      |            |          |           |                 |               |               |          |  |  |  |  |
|                          | City                                                                                               | State<br>OH                                        | Zip Code                               |     |                                                   |      |            |          | A11AI     |                 |               |               |          |  |  |  |  |
|                          | Columbus                                                                                           |                                                    | 43230                                  |     |                                                   |      |            |          | ceipt ti  |                 |               |               |          |  |  |  |  |
|                          | FEC ID number of contributing federal political committee.                                         | C                                                  |                                        |     |                                                   |      |            |          |           | -               |               | .66           |          |  |  |  |  |
|                          | Name of Employer                                                                                   | Occupation                                         | ······································ |     |                                                   |      |            |          |           |                 |               |               |          |  |  |  |  |
|                          | Strategic Public Partners                                                                          | Office Man                                         | ager                                   |     |                                                   |      |            |          |           |                 |               |               |          |  |  |  |  |
|                          | Receipt For:<br>Primary General                                                                    |                                                    | Year-to-Date ▼                         | .   |                                                   |      |            |          |           |                 |               |               |          |  |  |  |  |
|                          | Other (specify) V                                                                                  |                                                    | 863.20                                 |     |                                                   |      |            |          |           |                 |               |               |          |  |  |  |  |
|                          |                                                                                                    | Case Case Case                                     |                                        |     |                                                   |      |            |          |           |                 |               |               |          |  |  |  |  |
| в.                       | Full Name (Last, First, Middle Initial)<br>Linda Hays                                              |                                                    |                                        | D   | ate of                                            | i Re | ceipt      |          |           |                 |               |               |          |  |  |  |  |
|                          | Mailing Address 4526 Faneuil Hall Place.                                                           |                                                    | 11 15 2014                             |     |                                                   |      |            |          |           |                 |               |               |          |  |  |  |  |
|                          | City                                                                                               | State                                              | Zip Code                               |     | Transaction ID : SA11AI.5714                      |      |            |          |           |                 |               |               |          |  |  |  |  |
|                          | Columbus                                                                                           | OH                                                 | 43230                                  |     |                                                   |      |            |          | ceipt t   |                 |               |               | _        |  |  |  |  |
|                          | FEC ID number of contributing federal political committee.                                         | C                                                  |                                        |     | -                                                 | -    |            | -        |           | -               | 41            | .66           |          |  |  |  |  |
|                          | Name of Employer                                                                                   | Occupation                                         | )                                      |     |                                                   |      |            |          |           |                 |               |               |          |  |  |  |  |
|                          | Strategic Public Partners                                                                          | Office Mana                                        | ager                                   |     |                                                   |      |            |          |           |                 |               |               |          |  |  |  |  |
|                          | Receipt For:<br>Primary General                                                                    | Aggregate                                          | Year-to-Date 🛡                         |     |                                                   |      |            |          |           |                 |               |               |          |  |  |  |  |
|                          | Primary General<br>Other (specify) ▼                                                               |                                                    | <u>^904.86</u>                         |     |                                                   |      |            |          |           |                 |               |               |          |  |  |  |  |
| ~                        | Full Name (Last, First, Middle Initial)<br>Darrin Klinger                                          |                                                    |                                        |     | )ate o                                            | f Do | opint      |          |           |                 |               |               |          |  |  |  |  |
| υ.                       | Mailing Address 1053 Cheliway Ct.                                                                  | · · · · ·                                          |                                        |     | ห้า√าพี                                           | _    | Ceipi<br>T | ۳D آ     | / 63      | ~~              | - <del></del> | - <b></b> - 1 | ł        |  |  |  |  |
|                          |                                                                                                    |                                                    |                                        | _ 1 | 10                                                |      | 3          | <u>o</u> |           | 2(              | 014           |               |          |  |  |  |  |
|                          | City<br>Powell                                                                                     | State<br>OH                                        | Zip Code<br>43068                      |     |                                                   |      |            |          | A11A      |                 |               |               |          |  |  |  |  |
|                          |                                                                                                    |                                                    |                                        |     |                                                   |      |            |          | ceipt t   |                 |               |               |          |  |  |  |  |
|                          | FEC ID number of contributing federal political committee.                                         | C                                                  |                                        |     | -                                                 | ¢    |            | ~        |           | <u></u>         | 208           | 3.33          | <u> </u> |  |  |  |  |
|                          | Name of Employer     Oc       Strategic Public Partners     Cc       Receipt For:     Acceleration |                                                    |                                        | 7   |                                                   |      |            |          |           |                 |               |               |          |  |  |  |  |
|                          |                                                                                                    |                                                    |                                        | 4   |                                                   |      |            |          |           |                 |               |               |          |  |  |  |  |
|                          | Primary General                                                                                    | Aggregate                                          | Year-to-Date ▼                         | -   |                                                   |      |            |          |           |                 |               |               |          |  |  |  |  |
|                          | Other (specify) ▼                                                                                  |                                                    |                                        |     |                                                   |      |            |          |           |                 |               |               |          |  |  |  |  |
|                          | SUBTOTAL of Receipts This Page (optional)                                                          |                                                    |                                        | ĺ   |                                                   | ~~~  |            |          |           | ~               | 291           |               |          |  |  |  |  |
| 1                        | OTAL This Period (last page this line number                                                       | only)                                              | •••••                                  |     |                                                   |      |            | _        |           |                 |               |               | Ĵ        |  |  |  |  |

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| SCHEDULE A (FEC Form 3X) |                                                                                                 | ULE A (FEC Form 3X) Use separate schedule(s) |                                       |                                                                                                                                                     |  |  |
|--------------------------|-------------------------------------------------------------------------------------------------|----------------------------------------------|---------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| IT                       | EMIZED RECEIPTS                                                                                 |                                              | for each category of the              |                                                                                                                                                     |  |  |
|                          |                                                                                                 |                                              | Detailed Summary Page                 | $\begin{array}{ c c c c c c c c } X & 11a & 11b & 11c & 12 \\ \hline 13 & 14 & 15 & 16 & 17 \\ \hline 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$ |  |  |
|                          | y information copied from such Reports and Sta<br>for commercial purposes, other than using the |                                              |                                       | erson for the purpose of soliciting contributions                                                                                                   |  |  |
| F                        | NAME OF COMMITTEE (In Full)                                                                     |                                              | ·····                                 |                                                                                                                                                     |  |  |
| $\rangle$                | Strategic Public Partners, LLC P                                                                | AC (SPI                                      | P-PAC)                                |                                                                                                                                                     |  |  |
| Α.                       | Full Name (Last, First, Middle Initial)<br>Darrin Klinger                                       | Parrin Klinger                               |                                       |                                                                                                                                                     |  |  |
|                          | Mailing Address 1053 Cheliway Ct.                                                               | 11 15 2014                                   |                                       |                                                                                                                                                     |  |  |
|                          | City<br>Powell                                                                                  | State<br>OH                                  | Zip Code                              | Transaction ID : SA11AI.5715                                                                                                                        |  |  |
|                          |                                                                                                 |                                              | 43068                                 | Amount of Each Receipt this Period                                                                                                                  |  |  |
|                          | FEC ID number of contributing<br>federal political committee.                                   | C                                            |                                       | 208.33                                                                                                                                              |  |  |
|                          | Name of Employer                                                                                | Occupation                                   | · ••• • ••• •                         |                                                                                                                                                     |  |  |
|                          | Strategic Public Partners                                                                       | Consultant                                   |                                       |                                                                                                                                                     |  |  |
|                          | Receipt For:                                                                                    | Aggregate                                    | Year-to-Date <b>V</b>                 |                                                                                                                                                     |  |  |
|                          | Primary General Other (specify)                                                                 |                                              | 4374.95                               |                                                                                                                                                     |  |  |
|                          |                                                                                                 | Land and the                                 |                                       | 8                                                                                                                                                   |  |  |
| В.                       | Full Name (Last, First, Middle Initial)<br>Carlos LoParo                                        |                                              |                                       | Date of Receipt                                                                                                                                     |  |  |
|                          | Mailing Address 9838 Glasgow Court                                                              |                                              |                                       |                                                                                                                                                     |  |  |
|                          | City                                                                                            | State                                        | Zip Code                              | Transaction ID : SA11AI.5730                                                                                                                        |  |  |
|                          | Dublin                                                                                          | OH                                           | 43017                                 | Amount of Each Receipt this Period                                                                                                                  |  |  |
|                          | FEC ID number of contributing<br>federal political committee.                                   | C                                            |                                       | 208.33                                                                                                                                              |  |  |
|                          | Name of Employer                                                                                | Occupation                                   |                                       |                                                                                                                                                     |  |  |
|                          | SPP                                                                                             | Consultant                                   |                                       |                                                                                                                                                     |  |  |
|                          | Receipt For:                                                                                    | Aggregate                                    | Year-to-Date <b>V</b>                 |                                                                                                                                                     |  |  |
|                          | Primary General                                                                                 |                                              | 4166.60                               |                                                                                                                                                     |  |  |
|                          | Other (specify) ▼                                                                               | barre                                        |                                       |                                                                                                                                                     |  |  |
| <b>C</b> .               | Full Name (Last, First, Middle Initial)<br>Carlos LoParo                                        |                                              |                                       | Date of Receipt                                                                                                                                     |  |  |
|                          | Mailing Address 9838 Glasgow Court                                                              |                                              |                                       | 11 15 2014                                                                                                                                          |  |  |
|                          | City                                                                                            | State                                        | Zip Code                              | Transaction ID : SA11AI.5716                                                                                                                        |  |  |
|                          | Dublin                                                                                          | ОН                                           | 43017                                 | Amount of Each Receipt this Period                                                                                                                  |  |  |
|                          | FEC ID number of contributing<br>federal political committee.                                   | C                                            |                                       | 208.33                                                                                                                                              |  |  |
|                          | Name of Employer                                                                                | Occupation                                   | · · · · · · · · · · · · · · · · · · · |                                                                                                                                                     |  |  |
|                          | SPP                                                                                             | Consultant                                   |                                       |                                                                                                                                                     |  |  |
|                          | Receipt For:                                                                                    | Aggregate                                    |                                       |                                                                                                                                                     |  |  |
|                          | Primary General                                                                                 |                                              |                                       | 8                                                                                                                                                   |  |  |
| _                        | Other (specify)                                                                                 | Lasar-                                       | 4374.93                               |                                                                                                                                                     |  |  |
| s                        | UBTOTAL of Receipts This Page (optional)                                                        |                                              |                                       | 624.99                                                                                                                                              |  |  |
| F                        | OTAL This Period (last page this line number o                                                  | only)                                        | •••••••                               |                                                                                                                                                     |  |  |

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FEC Schedule A (Form 3X) Rev. 02/2003

| SC                                        | HEDULE A (FEC Form 3X)                                                                            | 1           |                                                      | FOR LINE NUMBER: PAGE 10 OF 16     |  |  |
|-------------------------------------------|---------------------------------------------------------------------------------------------------|-------------|------------------------------------------------------|------------------------------------|--|--|
| IT                                        | EMIZED RECEIPTS                                                                                   |             | Use separate schedule(s)<br>for each category of the | (check only one)                   |  |  |
|                                           |                                                                                                   |             | Detailed Summary Page                                |                                    |  |  |
|                                           | y information copied from such Reports and Sta<br>for commercial purposes, other than using the r |             |                                                      |                                    |  |  |
| $\left \right\rangle$                     | NAME OF COMMITTEE (In Full)<br>Strategic Public Partners, LLC P.                                  | AC (SPF     | P-PAC)                                               |                                    |  |  |
| ۲ <u>ــــــ</u>                           | Full Name (Last, First, Middle Initial)<br>Brandon Lynaugh                                        |             |                                                      | Date of Receipt                    |  |  |
|                                           | Mailing Address 1299 Avondale Ave.                                                                |             |                                                      |                                    |  |  |
|                                           | City .                                                                                            | State<br>OH | Zip Code                                             | Transaction ID : SA11AI.5731       |  |  |
|                                           | Grandview Heights                                                                                 |             | 43212                                                | Amount of Each Receipt this Period |  |  |
|                                           | FEC ID number of contributing<br>federal political committee.                                     | C           |                                                      | 208.33                             |  |  |
|                                           | Name of Employer                                                                                  | Occupation  |                                                      |                                    |  |  |
|                                           | Strategic Public Partners Receipt For:                                                            | Consultant  |                                                      |                                    |  |  |
|                                           | Primary General                                                                                   | 00 0        | Year-to-Date ▼                                       |                                    |  |  |
|                                           | Other (specify)                                                                                   |             | 4166.61                                              |                                    |  |  |
|                                           | Full Name (Last, First, Middle Initial)<br>Brandon Lynaugh                                        |             |                                                      | Date of Receipt                    |  |  |
|                                           | Mailing Address 1299 Avondale Ave.                                                                | 11 15 2014  |                                                      |                                    |  |  |
|                                           | City<br>Grandwight Heighte                                                                        | State<br>OH | Zip Code                                             | Transaction ID : SA11AI.5717       |  |  |
|                                           | Grandview Heights                                                                                 |             | 43212                                                | Amount of Each Receipt this Period |  |  |
|                                           | FEC ID number of contributing federal political committee.                                        | C           |                                                      | 208.33                             |  |  |
|                                           | Name of Employer<br>Strategic Public Partners                                                     | Occupation  | · · · · · · · · · · · · · · · · · · ·                |                                    |  |  |
|                                           | Receipt For:                                                                                      | Consultant  | ·····                                                |                                    |  |  |
|                                           | Primary General                                                                                   | Aggregate   | Year-to-Date ▼                                       |                                    |  |  |
|                                           | Other (specify)                                                                                   |             | 4374.94                                              |                                    |  |  |
| с.                                        | Full Name (Last, First, Middle Initial)<br>Kamiliah Prince                                        |             |                                                      | Date of Receipt                    |  |  |
|                                           | Mailing Address 7494 Bloomfield Place                                                             |             |                                                      |                                    |  |  |
|                                           | City<br>Dublin                                                                                    | State<br>OH | Zip Code<br>43016                                    | Transaction ID : SA11AI.5732       |  |  |
|                                           |                                                                                                   |             |                                                      | Amount of Each Receipt this Period |  |  |
|                                           | FEC ID number of contributing federal political committee.                                        |             |                                                      |                                    |  |  |
|                                           | Name of Employer                                                                                  | Occupation  | ·                                                    |                                    |  |  |
|                                           | Strategic Public Partners Receipt For:                                                            | Associate   | · · · · · · · · · · · · · · · · · · ·                | _                                  |  |  |
|                                           | Primary General<br>Other (specify) $ earrow$                                                      |             | Year-to-Date ♥<br>1353.20                            |                                    |  |  |
| SUBTOTAL of Receipts This Page (optional) |                                                                                                   |             |                                                      |                                    |  |  |
|                                           | OTAL This Period (last page this line number o                                                    |             | +                                                    |                                    |  |  |

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| S          | CHEDULE A (FEC Form 3X)                                                                             |                                      | Use separate schedule(s)                          | FOR LINE NUMBER: PAGE 11 OF 16                                                                 |
|------------|-----------------------------------------------------------------------------------------------------|--------------------------------------|---------------------------------------------------|------------------------------------------------------------------------------------------------|
| IT         | EMIZED RECEIPTS                                                                                     | I                                    | for each category of the<br>Detailed Summary Page | (check only one)                                                                               |
|            | ny information copied from such Reports and Sta<br>for commercial purposes, other than using the    |                                      |                                                   |                                                                                                |
|            | NAME OF COMMITTEE (In Full)<br>Strategic Public Partners, LLC P                                     | AC (SPI                              | P-PAC)                                            |                                                                                                |
| Α.         | Full Name (Last, First, Middle Initial)<br>Kamiliah Prince<br>Mailing Address 7494 Bloomfield Place |                                      |                                                   | Date of Receipt                                                                                |
|            | City<br>Dublin                                                                                      | State<br>OH                          | Zip Code<br>43016                                 | 11     15     2014       Transaction ID : SA11AI.5718       Amount of Each Receipt this Period |
|            | FEC ID number of contributing federal political committee.                                          | C                                    |                                                   | 41.66                                                                                          |
|            | Name of Employer Strategic Public Partners Receipt For:                                             | Occupation<br>Associate<br>Aggregate | Year-to-Date ▼                                    |                                                                                                |
|            | Primary ☐ General<br>Other (specify) ▼                                                              |                                      | 1394.86                                           | ]                                                                                              |
| <b>B</b> . | Full Name (Last, First, Middle Initial) Sheila Ross                                                 |                                      |                                                   | Date of Receipt                                                                                |
|            | Mailing Address 1579 Northwest Blvd<br>Apt. 2<br>City                                               | State                                | Zip Code                                          | 10 30 2014<br>Transaction ID : SA11AI.5733                                                     |
|            | Columbus<br>FEC ID number of contributing<br>federal political committee.                           | С                                    |                                                   | Amount of Each Receipt this Period<br>41.66                                                    |
|            | Name of Employer<br>Strategic Public Partners                                                       | Occupation<br>Associate              | n<br>                                             |                                                                                                |
|            | Receipt For:<br>Primary General<br>Other (specify) ▼                                                | Aggregate                            | Year-to-Date ▼<br>                                |                                                                                                |
| C.         | Full Name (Last, First, Middle Initial)<br>Sheila Ross                                              |                                      |                                                   | Date of Receipt                                                                                |
|            | Mailing Address 1579 Northwest Blvd<br>Apt. 2<br>City                                               | State                                | Zip Code                                          | 11 15 2014<br>Transaction ID : SA11AI.5719                                                     |
|            | Columbus<br>FEC ID number of contributing<br>federal political committee.                           | ОН                                   | 43212                                             | Amount of Each Receipt this Period                                                             |
|            | Name of Employer<br>Strategic Public Partners                                                       | Occupation<br>Associate              | 1                                                 |                                                                                                |
|            | Receipt For:<br>Primary General<br>Other (specify) ▼                                                | Aggregate                            | Year-to-Date ▼<br>914.86                          |                                                                                                |
| ſ          | SUBTOTAL of Receipts This Page (optional)                                                           |                                      |                                                   | 124.98                                                                                         |
|            | TOTAL This Period (last page this line number o                                                     | only)                                |                                                   |                                                                                                |

FEC Schedule A (Form 3X) Rev. 02/2003

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| S       | CHEDULE A (FEC Form 3X)                                                                         |             | Use separate schedule(s) | FOR LINE NUMBER: PAGE 12 OF 16           |  |  |  |  |
|---------|-------------------------------------------------------------------------------------------------|-------------|--------------------------|------------------------------------------|--|--|--|--|
| IT      | EMIZED RECEIPTS                                                                                 |             | for each category of the | (check only one)                         |  |  |  |  |
|         |                                                                                                 |             | Detailed Summary Page    |                                          |  |  |  |  |
|         | y information copied from such Reports and Sta<br>for commercial purposes, other than using the |             |                          |                                          |  |  |  |  |
| $\land$ | NAME OF COMMITTEE (In Full)                                                                     |             |                          |                                          |  |  |  |  |
| Ľ       | Strategic Public Partners, LLC P                                                                | AC (SPI     | P-PAC)                   |                                          |  |  |  |  |
| Α.      | Full Name (Last, First, Middle Initial)<br>Mr. Kevin Schmidt                                    |             |                          | Date of Receipt                          |  |  |  |  |
|         | Mailing Address 220 Kemperwood Drive                                                            |             |                          | Land ( Land ) ( Land )                   |  |  |  |  |
|         | City                                                                                            | State       | Zip Code                 | 10302014<br>Transaction ID : SA11AI.5734 |  |  |  |  |
|         | Pataskala                                                                                       | ОН          | 43062                    | Amount of Each Receipt this Period       |  |  |  |  |
|         | FEC ID number of contributing<br>federal political committee.                                   | С           |                          | 208.33                                   |  |  |  |  |
|         | Name of Employer                                                                                | Occupation  |                          | -                                        |  |  |  |  |
|         | SPP                                                                                             | Consultant  |                          |                                          |  |  |  |  |
|         | Receipt For:                                                                                    | Aggregate   | Year-to-Date V           |                                          |  |  |  |  |
|         | Primary General<br>Other (specify) ▼                                                            |             | 4166.60                  |                                          |  |  |  |  |
|         |                                                                                                 |             |                          | ,                                        |  |  |  |  |
| В.      | Full Name (Last, First, Middle Initial)<br>Mr. Kevin Schmidt                                    |             |                          | Date of Receipt                          |  |  |  |  |
|         | Mailing Address 220 Kemperwood Drive                                                            |             |                          | LEASTER & LASSE                          |  |  |  |  |
|         | · · · · · · · · · · · · · · · · · · ·                                                           |             |                          | 11 15 _2014                              |  |  |  |  |
|         | City                                                                                            | State<br>OH | Zip Code<br>43062        | Transaction ID : SA11AI.5720             |  |  |  |  |
|         | Pataskala                                                                                       |             |                          | Amount of Each Receipt this Period       |  |  |  |  |
|         | FEC ID number of contributing federal political committee.                                      | C           |                          | 208.33                                   |  |  |  |  |
|         | Name of Employer                                                                                | Occupation  | ۰                        |                                          |  |  |  |  |
|         | SPP                                                                                             | Consultant  |                          |                                          |  |  |  |  |
|         | Receipt For:                                                                                    | Aggregate   | Year-to-Date V           |                                          |  |  |  |  |
|         | Other (specify) ▼                                                                               |             | <u>4374.93</u>           |                                          |  |  |  |  |
| С.      | Full Name (Last, First, Middle Initial)<br>Reid Vineis                                          |             | ·····                    | Date of Receipt                          |  |  |  |  |
| 2.      | Mailing Address 91 W. Town St.                                                                  |             |                          |                                          |  |  |  |  |
|         |                                                                                                 |             | 7                        | 10 30 2014                               |  |  |  |  |
|         | City<br>Columbus                                                                                | State<br>OH | Zip Code<br>43215        | Transaction ID : SA11AI.5735             |  |  |  |  |
|         | FEC ID number of contributing                                                                   |             |                          | Amount of Each Receipt this Period       |  |  |  |  |
|         | federal political committee.                                                                    | <u>Cl</u>   | the track of the track   | 104.16                                   |  |  |  |  |
|         | Name of Employer                                                                                | Occupation  | i                        | -                                        |  |  |  |  |
|         | Strategic Public Partners                                                                       | Associate   |                          |                                          |  |  |  |  |
|         | Receipt For:                                                                                    |             | Year-to-Date <b>V</b>    |                                          |  |  |  |  |
|         | Other (specify)                                                                                 |             | 2103.20                  |                                          |  |  |  |  |
|         |                                                                                                 |             |                          | 3                                        |  |  |  |  |
| 5       | UBTOTAL of Receipts This Page (optional)                                                        |             | 1                        | 520.82                                   |  |  |  |  |
| 1       | OTAL This Period (last page this line number of                                                 | only)       | ······                   |                                          |  |  |  |  |

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| SCHEDULE A (FEC Form 3X)                                                                            | ]                      |                                                                                                                        | FOR LINE NUMBER: PAGE 13 OF 16      |  |  |  |  |
|-----------------------------------------------------------------------------------------------------|------------------------|------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--|--|--|--|
| ITEMIZED RECEIPTS                                                                                   |                        | Use separate schedule(s)<br>for each category of the                                                                   | (check only one)                    |  |  |  |  |
|                                                                                                     |                        | Detailed Summary Page                                                                                                  | X 11a 11b 11c 12                    |  |  |  |  |
| Any information applied from such Departs and Ot                                                    |                        | w not be cold or used by cruci-                                                                                        | 13 14 15 16 17                      |  |  |  |  |
| Any information copied from such Reports and St<br>or for commercial purposes, other than using the |                        |                                                                                                                        |                                     |  |  |  |  |
| NAME OF COMMITTEE (In Full)                                                                         |                        |                                                                                                                        |                                     |  |  |  |  |
| Strategic Public Partners, LLC F                                                                    | PAC (SPF               | P-PAC)                                                                                                                 |                                     |  |  |  |  |
| Full Name (Last, First, Middle Initial)<br>A. Reid Vineis                                           |                        |                                                                                                                        | Date of Receipt                     |  |  |  |  |
| Mailing Address 91 W. Town St.                                                                      |                        |                                                                                                                        | لمحمدها العدها العدها               |  |  |  |  |
| City                                                                                                | State                  | Zip Code                                                                                                               | Transaction ID : SA11AI.5721        |  |  |  |  |
| Columbus                                                                                            | ОН                     | 43215                                                                                                                  | Amount of Each Receipt this Period  |  |  |  |  |
| FEC ID number of contributing                                                                       |                        |                                                                                                                        |                                     |  |  |  |  |
| federal political committee.                                                                        |                        | <br>                                                                                                                   |                                     |  |  |  |  |
| Name of Employer                                                                                    | Occupation             |                                                                                                                        | 1                                   |  |  |  |  |
| Strategic Public Partners                                                                           | Associate              |                                                                                                                        | _                                   |  |  |  |  |
| Receipt For:                                                                                        |                        | Year-to-Date ▼                                                                                                         |                                     |  |  |  |  |
| Primary General<br>Other (specify) ▼                                                                |                        | 2207.36                                                                                                                |                                     |  |  |  |  |
|                                                                                                     |                        |                                                                                                                        |                                     |  |  |  |  |
| Full Name (Last, First, Middle Initial)<br>B.                                                       | ·                      | · · · · · · · · · · · · · · · · · · ·                                                                                  | Date of Receipt                     |  |  |  |  |
| Mailing Address                                                                                     |                        |                                                                                                                        | المحمصما العمعا العصار              |  |  |  |  |
| City                                                                                                | Chein                  | Zin Codo                                                                                                               |                                     |  |  |  |  |
| City                                                                                                | State                  | Zip Code                                                                                                               | Amount of Each Parcint this Period  |  |  |  |  |
| EEC ID number of contributing                                                                       |                        | ,                                                                                                                      | Amount of Each Receipt this Period  |  |  |  |  |
| FEC ID number of contributing<br>federal political committee.                                       | C                      |                                                                                                                        |                                     |  |  |  |  |
| Name of Employer                                                                                    | Occupation             | namen ann an an Anna Anna an Anna Anna Anna Anna Anna Anna Ann<br>Anna |                                     |  |  |  |  |
|                                                                                                     |                        |                                                                                                                        |                                     |  |  |  |  |
| Receipt For:                                                                                        | Aggregate              | Year-to-Date ▼                                                                                                         |                                     |  |  |  |  |
| Primary General                                                                                     |                        |                                                                                                                        |                                     |  |  |  |  |
| Other (specify) V                                                                                   | <u>Land</u>            | <u>h</u>                                                                                                               |                                     |  |  |  |  |
| Full Name (Last, First, Middle Initial)<br>C.                                                       |                        |                                                                                                                        | Date of Receipt                     |  |  |  |  |
| Mailing Address                                                                                     |                        |                                                                                                                        |                                     |  |  |  |  |
|                                                                                                     |                        |                                                                                                                        |                                     |  |  |  |  |
| City                                                                                                | State                  | Zip Code                                                                                                               |                                     |  |  |  |  |
| EEC ID number of contribution                                                                       |                        |                                                                                                                        | Arnount of Each Receipt this Period |  |  |  |  |
| FEC 1D number of contributing<br>federal political committee.                                       | C                      | <u></u>                                                                                                                |                                     |  |  |  |  |
| Name of Employer                                                                                    | Occupation             |                                                                                                                        |                                     |  |  |  |  |
|                                                                                                     | <u> </u>               |                                                                                                                        | _                                   |  |  |  |  |
| Receipt For:                                                                                        | Aggregate              | Year-to-Date ▼                                                                                                         |                                     |  |  |  |  |
| Other (specify)                                                                                     |                        | ┍┙┙┙┙┙┙┙┙┙┙┙┙┙┙┙┙<br>╡                                                                                                 |                                     |  |  |  |  |
|                                                                                                     | <u><u><u>k</u></u></u> | <u> </u>                                                                                                               |                                     |  |  |  |  |
|                                                                                                     |                        |                                                                                                                        |                                     |  |  |  |  |
| SUBTOTAL of Receipts This Page (optional)                                                           |                        |                                                                                                                        |                                     |  |  |  |  |
| TOTAL This Period (last page this line number of                                                    | only)                  | ••••••                                                                                                                 | 3041.56                             |  |  |  |  |

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FEC Schedule A (Form 3X) Rev. 02/2003

| S                      | CHEDULE B (FEC Form 3X)                                      |                                     | F           |      |           | UMBER:                                  |            |              |                         | PAC       | GE 14             | OF 16          |
|------------------------|--------------------------------------------------------------|-------------------------------------|-------------|------|-----------|-----------------------------------------|------------|--------------|-------------------------|-----------|-------------------|----------------|
| ITEMIZED DISBURSEMENTS |                                                              |                                     |             |      | only o    | y one)                                  |            |              |                         |           |                   |                |
|                        |                                                              | Detailed Summary Page               |             |      | 21b<br>27 | 22<br>28a                               | ×          | 23<br>28b    |                         | 24<br>28c | 25                | 26<br>30b      |
| Ar                     | y information copied from such Reports and Statem            | l<br>nents may not be sold or us    | l<br>sed by |      |           |                                         |            |              |                         |           |                   |                |
|                        | for commercial purposes, other than using the name           |                                     |             |      |           |                                         |            |              |                         |           |                   |                |
| $\mathbb{N}$           | NAME OF COMMITTEE (In Full)                                  |                                     |             |      |           |                                         |            |              |                         |           |                   |                |
| $ \rangle$             | Strategic Public Partners, LLC PAC                           | J (SPP-PAC)                         |             |      |           |                                         |            |              |                         |           |                   |                |
| Ľ                      | Full Name (Last, First, Middle Initial)                      |                                     |             |      |           |                                         |            |              |                         |           |                   |                |
| Α.                     | Jim Renacci for Congress                                     |                                     |             |      |           | Date of                                 | Dis        | burse        | ment                    |           |                   |                |
|                        | Mailing Address 150 Smokerise Drive                          |                                     |             |      |           | 10                                      | ]′         | 2            |                         | Ľ         | 2014              |                |
|                        | City State Zip Code                                          |                                     |             |      |           | Trono                                   |            | on 10        | . 60                    | 22 67     | 70 <sup>'</sup> 7 |                |
|                        | Wadsworth                                                    | OH 44281                            |             |      |           | Trans                                   | acu        | опі          | : 38                    | 23.51     | 07                |                |
|                        | Purpose of Disbursement<br>Contribution to Federal Candidate |                                     |             | )11  |           | Amount                                  | tof        | Fach         | Disb                    | irsen     | nent this         | Period         |
|                        | Candidate Name                                               |                                     | 6           | egon |           |                                         | -          |              | -                       |           |                   |                |
|                        | James Renacci                                                |                                     |             | ype  | <i>y,</i> | 1                                       | <u>~</u>   | 7            |                         |           | 5                 | 00.00          |
|                        |                                                              | nent For: 2014<br>Primary 🔀 General |             |      |           |                                         |            |              |                         |           |                   |                |
|                        | President                                                    | Other (specify)                     |             |      |           | -                                       |            |              |                         |           |                   |                |
|                        | State: OH District: 16                                       |                                     |             |      |           |                                         |            |              |                         |           |                   |                |
| _                      | Full Name (Last, First, Middle Initial)                      |                                     |             |      |           | _                                       |            |              |                         |           |                   |                |
| В.                     |                                                              |                                     |             |      |           | Date of                                 | i Dis      | burse        | ement                   |           |                   |                |
|                        | Mailing Address                                              |                                     |             |      |           |                                         |            |              |                         |           |                   |                |
|                        | City                                                         | State Zip Code                      |             |      |           |                                         |            |              |                         |           |                   |                |
|                        | Purpose of Disbursement                                      |                                     |             |      |           |                                         |            |              |                         |           |                   |                |
|                        |                                                              |                                     |             |      |           | Amount of Each Disbursement this Period |            |              |                         |           |                   |                |
|                        | Candidate Name                                               |                                     | Category/   |      |           |                                         |            |              |                         |           |                   |                |
|                        | Office Squebt:     House   Distance                          | most For                            |             | ype  |           |                                         |            |              |                         |           | أتحتج             |                |
|                        | Office Sought: House Disbursen                               | nent For:<br>Primary General        |             |      |           |                                         |            |              |                         |           |                   |                |
|                        |                                                              | Other (specify)                     |             |      |           |                                         |            |              |                         |           |                   |                |
|                        | State: District:                                             |                                     |             |      |           |                                         | -          |              |                         |           |                   |                |
| c                      | Full Name (Last, First, Middle Initial)                      |                                     |             |      |           |                                         | . D:-      |              |                         | _         | _                 |                |
| C.                     |                                                              |                                     |             |      |           | Date of                                 | וטו<br>קוט | sburse       |                         |           | ~ <u>~~</u> ~~    |                |
|                        | Mailing Address                                              |                                     |             |      |           |                                         |            |              |                         | L         |                   |                |
|                        | City                                                         | State Zip Code                      |             |      |           |                                         |            |              |                         |           |                   |                |
|                        | Purpose of Disbursement                                      |                                     |             |      |           |                                         |            | <b>F</b> . 1 | <b>D</b> <sup>1</sup> · |           |                   | <b>D</b> . 1 1 |
|                        | Candidate Name Cate                                          |                                     |             |      | <br>y/    | Amouni                                  | . OT       | ∟acn<br>つ    | UISD                    | urser<br> | nent this         | renod          |
|                        | Office Sought: House Disbursement For:                       |                                     | · ·         | /    |           | <u> <u> </u></u>                        |            | 7            |                         |           | <u></u>           |                |
|                        | Senate Primary General                                       |                                     |             |      |           |                                         |            |              |                         |           |                   |                |
|                        | State: District:                                             | Other (specify)                     |             |      |           |                                         |            |              |                         |           |                   |                |
| Γ                      |                                                              | · · · ·                             |             |      |           |                                         | <b>∵</b> ≈ |              | ي من                    |           |                   |                |
| s                      | UBTOTAL of Disbursements This Page (optional)                |                                     |             |      | →         |                                         | <u></u>    | Second       |                         | abe.      |                   | 00.00          |
| ד                      | OTAL This Period (last page this line number only)           | )                                   |             |      | ►         |                                         | <u>.</u>   | ·            | <u>-</u>                |           |                   | 00.00          |

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FEC Schedule B (Form 3X) Rev. 02/2003

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| sc                                                                      | HEDULE B (FEC Form 3X)                                                                                 |                                                          |                      |             | NUMBER PAGE 15 OF 16                                                             |  |  |  |  |  |  |
|-------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|----------------------------------------------------------|----------------------|-------------|----------------------------------------------------------------------------------|--|--|--|--|--|--|
| ITEMIZED DISBURSEMENTS Use separate schedule<br>for each category of th |                                                                                                        |                                                          |                      | (check only | ly one)                                                                          |  |  |  |  |  |  |
|                                                                         |                                                                                                        | Detailed Summary Page                                    |                      | 21b         | $ \begin{array}{c ccccccccccccccccccccccccccccccccccc$                           |  |  |  |  |  |  |
|                                                                         | y information copied from such Reports and Stater<br>for commercial purposes, other than using the nam |                                                          |                      | y any perso | on for the purpose of soliciting contributions                                   |  |  |  |  |  |  |
| $\overline{)}$                                                          | NAME OF COMMITTEE (In Full)                                                                            |                                                          |                      |             |                                                                                  |  |  |  |  |  |  |
| /                                                                       | Strategic Public Partners, LLC PAC                                                                     | C (SPP-PAC)                                              |                      |             |                                                                                  |  |  |  |  |  |  |
|                                                                         | Full Name (Last, First, Middle Initial)                                                                |                                                          |                      |             |                                                                                  |  |  |  |  |  |  |
| А.                                                                      | Citizens for Duffey                                                                                    |                                                          |                      |             | Date of Disbursement                                                             |  |  |  |  |  |  |
|                                                                         | Mailing Address 645 Farrington Drive                                                                   | · · · · ·                                                |                      |             |                                                                                  |  |  |  |  |  |  |
|                                                                         | City                                                                                                   | State Zip Code                                           |                      |             | T                                                                                |  |  |  |  |  |  |
|                                                                         | Worthington                                                                                            | OH 43085                                                 |                      |             | Transaction ID : SB29.5708                                                       |  |  |  |  |  |  |
|                                                                         | Purpose of Disbursement<br>Contribution to State Candidate                                             |                                                          |                      | 011         | Amount of Each Disbursement this Period                                          |  |  |  |  |  |  |
|                                                                         | Candidate Name                                                                                         |                                                          |                      | ategory/    | 500.00                                                                           |  |  |  |  |  |  |
|                                                                         | Mike Duffey                                                                                            |                                                          |                      | Туре        |                                                                                  |  |  |  |  |  |  |
|                                                                         | Senate<br>President                                                                                    | ment For: 2014<br>Primary X General<br>Other (specify) ▼ |                      |             |                                                                                  |  |  |  |  |  |  |
|                                                                         | State: District:                                                                                       | ·····                                                    |                      |             |                                                                                  |  |  |  |  |  |  |
| В.                                                                      | Full Name (Last, First, Middle Initial)<br>Citizens for Josh Mandel                                    |                                                          | Date of Disbursement |             |                                                                                  |  |  |  |  |  |  |
|                                                                         | Mailing Address 50 W Broad St. Ste 1900                                                                |                                                          | 10 / 22 / 2014       |             |                                                                                  |  |  |  |  |  |  |
|                                                                         | City<br>Columbus                                                                                       | State Zip Code<br>OH 43215                               |                      |             | Transaction ID : SB29.5693                                                       |  |  |  |  |  |  |
|                                                                         | Purpose of Disbursement<br>Contribution to State Candidate                                             |                                                          |                      | 011         | Amount of Each Disbursement this Period                                          |  |  |  |  |  |  |
|                                                                         | Candidate Name                                                                                         |                                                          |                      | ategory/    | F00.00                                                                           |  |  |  |  |  |  |
|                                                                         | Josh Mandel                                                                                            |                                                          |                      | Туре        | 500.00                                                                           |  |  |  |  |  |  |
|                                                                         | Office Sought: House Disburser<br>Senate President                                                     | ment For: 2014<br>Primary X General<br>Other (specify)   |                      |             |                                                                                  |  |  |  |  |  |  |
|                                                                         | State: District:                                                                                       | ·····                                                    |                      |             |                                                                                  |  |  |  |  |  |  |
| с.                                                                      | Full Name (Last, First, Middle Initial)<br>Citizens for Josh Mandel                                    |                                                          |                      |             | Date of Disbursement                                                             |  |  |  |  |  |  |
|                                                                         |                                                                                                        |                                                          |                      |             |                                                                                  |  |  |  |  |  |  |
|                                                                         | Mailing Address 50 W Broad St. Ste 1900                                                                |                                                          |                      |             | 10 22 2014                                                                       |  |  |  |  |  |  |
|                                                                         | City                                                                                                   | State Zip Code                                           |                      |             | Transaction ID : SB29.5696                                                       |  |  |  |  |  |  |
|                                                                         | Columbus                                                                                               | OH 43215                                                 |                      |             |                                                                                  |  |  |  |  |  |  |
|                                                                         | Purpose of Disbursement<br>Contribution to State Candidate                                             |                                                          |                      | 011         | Amount of Each Disbursement this Period                                          |  |  |  |  |  |  |
|                                                                         | Candidate Name                                                                                         |                                                          | C                    | ategory/    | 500.00                                                                           |  |  |  |  |  |  |
|                                                                         | Josh Mandel<br>Office Sought: House Disburse                                                           | ment For: 2014                                           |                      | Туре        |                                                                                  |  |  |  |  |  |  |
|                                                                         | Senate                                                                                                 | Primary X General                                        | I                    |             |                                                                                  |  |  |  |  |  |  |
|                                                                         | President                                                                                              | Other (specify)                                          |                      |             |                                                                                  |  |  |  |  |  |  |
|                                                                         | State: District:                                                                                       |                                                          |                      |             |                                                                                  |  |  |  |  |  |  |
| s                                                                       | UBTOTAL of Disbursements This Page (optional).                                                         |                                                          |                      |             | 1500.00                                                                          |  |  |  |  |  |  |
| 7                                                                       | OTAL This Period (last page this line number only                                                      | )<br>)                                                   | •                    |             |                                                                                  |  |  |  |  |  |  |
|                                                                         | has page and me heriod only                                                                            | ,                                                        |                      |             | ┊┈╌╀╼╾╀ <b>┰╱┊╢</b> <u></u> ┱┦┶╱╲╍┉ <u>╄</u> <u></u> ┓╱╲╓┦──┺ <sup>5</sup> ┷╍┦╌╍ |  |  |  |  |  |  |

FEC Schedule B (Form 3X) Rev. 02/2003

| SCHEDULE B (FEC Form 3X)                                                                                  | · · · · · · · · · · · · · · · · · · ·                                         | FOR LINE I               | NUMBER PAGE 16 OF 16                       |
|-----------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|--------------------------|--------------------------------------------|
| ITEMIZED DISBURSEMENTS                                                                                    | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | (check only<br>21b<br>27 |                                            |
| Any information copied from such Reports and State<br>or for commercial purposes, other than using the na |                                                                               |                          |                                            |
| NAME OF COMMITTEE (In Full)                                                                               |                                                                               |                          |                                            |
| Strategic Public Partners, LLC PA                                                                         | C (SPP-PAC)                                                                   |                          |                                            |
| Full Name (Last, First, Middle Initial)                                                                   |                                                                               |                          | Date of Disbursement                       |
| A. French for Justice                                                                                     |                                                                               |                          |                                            |
| Mailing Address 100 South Third St.                                                                       |                                                                               |                          | 10 24 2014                                 |
| City                                                                                                      | State Zip Code                                                                |                          | Transaction ID : SB29.5703                 |
| Columbus                                                                                                  | OH 43215                                                                      |                          | Transaction ID : 5629.5703                 |
| Purpose of Disbursement<br>Contribution to Local Candidate                                                |                                                                               |                          | Amount of Fact Distance and this Daried    |
| Candidate Name                                                                                            | [                                                                             | 011                      | Amount of Each Disbursement this Period    |
| Judi French                                                                                               |                                                                               | Category/<br>Type        | 500.00                                     |
|                                                                                                           | ment For: 2014                                                                | Туре                     |                                            |
| Senate                                                                                                    | Primary X General                                                             |                          |                                            |
| President                                                                                                 | Other (specify)                                                               |                          |                                            |
| State: District:                                                                                          |                                                                               |                          | · <u> </u>                                 |
| Full Name (Last, First, Middle Initial)                                                                   |                                                                               |                          |                                            |
| <ol> <li>Mike DeWine for Ohio</li> </ol>                                                                  |                                                                               |                          | Date of Disbursement                       |
| Moiling Addrosp. 0507 October Deed                                                                        |                                                                               |                          |                                            |
| Mailing Address 2587 Conley Road                                                                          |                                                                               |                          |                                            |
| City                                                                                                      | State Zip Code                                                                |                          | Transaction ID : SB29.5702                 |
| Cedarville                                                                                                | OH 45314                                                                      |                          | Transaction 1D : 3623.5702                 |
| Purpose of Disbursement<br>Contribution to State Candidate                                                |                                                                               |                          | Assessed of Frick Diskussessed this Devied |
| Candidate Name                                                                                            |                                                                               | 011                      | Amount of Each Disbursement this Period    |
| Mike DeWine                                                                                               |                                                                               | Category/<br>Type        | 1000.00                                    |
|                                                                                                           | ment For: 2014                                                                | Type                     |                                            |
| Senate                                                                                                    | Primary X General                                                             |                          |                                            |
| President                                                                                                 | Other (specify)                                                               |                          |                                            |
| State: District:                                                                                          |                                                                               |                          |                                            |
| Full Name (Last, First, Middle Initial)                                                                   |                                                                               |                          |                                            |
| <ol> <li>Troy Brewer for State Representa</li> </ol>                                                      | tive                                                                          |                          | Date of Disbursement                       |
| Mailing Addross, 6912 Chadatta Ava                                                                        |                                                                               |                          |                                            |
| Mailing Address 6213 Charlotte Ave<br>Suite 112                                                           |                                                                               |                          |                                            |
| City                                                                                                      | State Zip Code                                                                |                          |                                            |
| Nashville                                                                                                 | TN 37209                                                                      |                          | Transaction ID : SB29.5697                 |
| Purpose of Disbursement<br>Contribution to State Candidate                                                |                                                                               | and and and              |                                            |
|                                                                                                           |                                                                               | 011                      | Amount of Each Disbursement this Period    |
| Troy Brewer                                                                                               |                                                                               | Category/                | 250.00                                     |
|                                                                                                           | ment For: 2014                                                                | Туре                     | Karran and a second                        |
| Senate                                                                                                    | Primary X General                                                             |                          |                                            |
| President                                                                                                 | Other (specify)                                                               |                          |                                            |
| State: TN District: 50                                                                                    | ·                                                                             |                          |                                            |
| SUBTOTAL of Disbursements This Page (optional).                                                           |                                                                               |                          | 1750.00                                    |
|                                                                                                           | <u></u>                                                                       |                          |                                            |
| TOTAL This Period (last page this line number only                                                        | /)                                                                            | •••••• •                 | 3250.00                                    |

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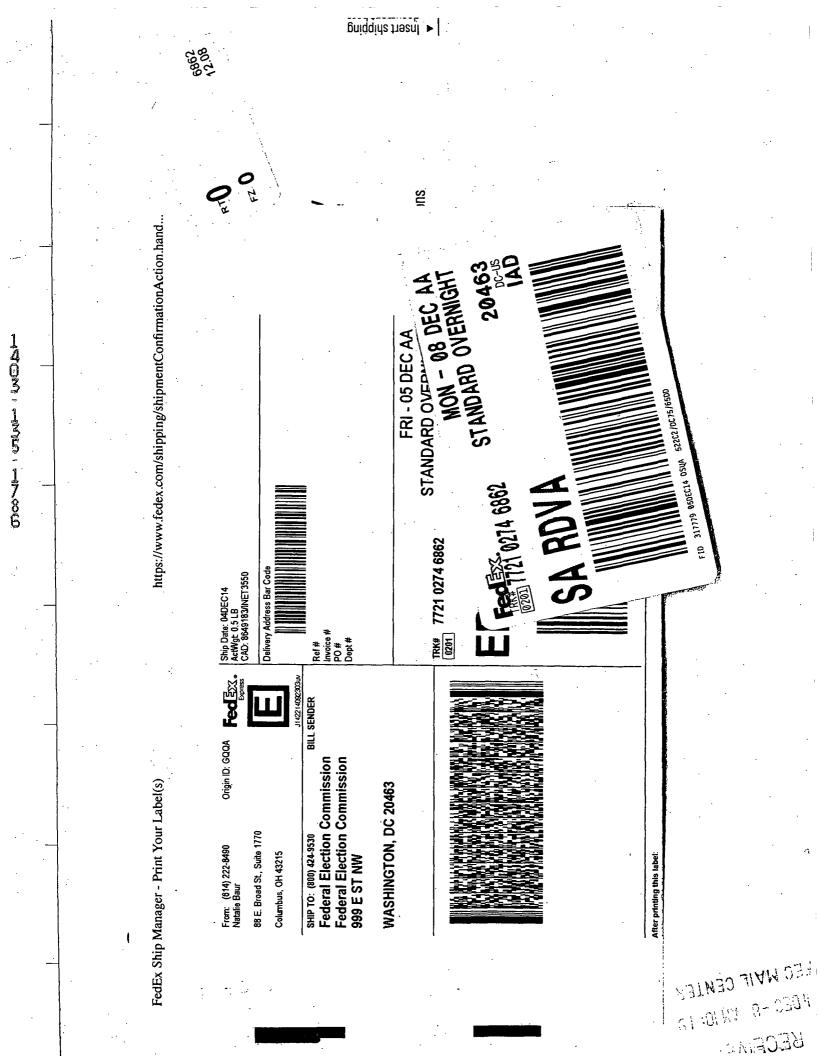
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FEC Schedule B (Form 3X) Rev. 02/2003

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| Federal Election Commission<br>ENVELOPE REPLACEMENT PAGE FOR INCOMING I<br>The FEC added this page to the end of this filing to indicate h |                                             |
|--------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|
| Hand Delivered                                                                                                                             | Date of Receipt                             |
| USPS First Class Mail                                                                                                                      | Postmarked                                  |
| USPS Registered/Certified                                                                                                                  | Postmarked (R/C)                            |
| USPS Priority Mail                                                                                                                         | Postmarked                                  |
| USPS Priority Mail Express                                                                                                                 | Postmarked                                  |
| Postmark Illegible                                                                                                                         |                                             |
| No Postmark                                                                                                                                |                                             |
| Overnight Delivery Service (Specify): Fed St.<br>Next Business                                                                             | Shipping Date<br>12-19/14<br>s Day Delivery |
| Received from House Records & Registration Office                                                                                          | Date of Receipt                             |
| Received from Senate Public Records Office                                                                                                 | Date of Receipt                             |
| Received from Electronic Filing Office                                                                                                     | Date of Receipt                             |
| Date of Re                                                                                                                                 | eceipt or Postmarked                        |
| A                                                                                                                                          | 12/8/19                                     |
| PREPARER<br>(8/2013)                                                                                                                       | DATE PREPARED                               |